

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 4: 19

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # G74806

(2)

1. Corporation Name

BCE INC.

Principal Place of Business

**1926 1/2 TYLER ST
HOLLYWOOD FL 33020-1517**

Mailing Address

**1926 1/2 TYLER ST
HOLLYWOOD FL 33020-1517**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/03/1983	3a. Date of Last Report 04/08/1994
4. FEI Number 59-2356804	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**CHANDLER, W.H.
1926 1/2 TYLER ST
HOLLYWOOD FL 33020-1517**

10. Name and Address of New Registered Agent

81 Name MELISSA ESTESS HURLEY
82 Street Address (P.O. Box Number is Not Acceptable) 1926 1/2 TYLER STREET
83 P.O. BOX 2428
84 City HOLLYWOOD, FLA.
85 Zip Code FL 33022

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Melissa Estess Hurley*

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	CHANDLER, W.H.	1.1 TITLE PD	Melissa Estess Hurley ☒ Change ☐ Addition
NAME		1.2 NAME HURLEY, MELISSA ESTESS	
STREET ADDRESS 1419 MOFFETT STREET	RESIGNED	1.3 STREET ADDRESS 449 SUNSET DRIVE	
CITY - ST - ZIP HOLLYWOOD FL		1.4 CITY - ST - ZIP HALLANDALE, FLA. 33009	☐ Change ☐ Addition
TITLE VD	HURLEY, MARY M	2.1 TITLE VD	
NAME		2.2 NAME HURLEY, MELISSA ESTESS	
STREET ADDRESS 449 SUNSET DR	SAME	2.3 STREET ADDRESS 449 SUNSET DRIVE	
CITY - ST - ZIP HALLANDALE FL		2.4 CITY - ST - ZIP HALLANDALE, FLA.	☒ Change ☐ Addition
TITLE STD	DAVIS, JANE, M	3.1 TITLE STD	
NAME		3.2 NAME SUE ANN ESTESS MC CARTHY	
STREET ADDRESS 2815 LEE ST	RESIGNED	3.3 STREET ADDRESS 1345 ADAMS STREET	
CITY - ST - ZIP HOLLYWOOD FL		3.4 CITY - ST - ZIP HOLLYWOOD, FLA. 33020	☐ Change ☐ Addition
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Melissa Estess Hurley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MELISSA ESTESS HURLEY

4/20/95

**305
925-6575**