FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H16385

(7)

B. S. & J., INC. OF ORLANDO

FILED	
May 02 1997 8:00an	1
Secretary of State	

								AIRI IRA			
Principal Place of Business Mailing Address					1 10 JIDT 8 10 110 110 1110 1110 1110 1610 1610 1	LOEL OFOIT DIOLE) B Q			
6599 KREIDT D ORLANDO FL S		6599 KREIDT DRIVE ORLANDO FL 32818-5351									
						3. Date Incorporated or Qualified 08/14/1984	3a. Date o		hode		
	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			plied For		
21	21	26				59-2428360 Not Applica					
Sulte, Apt.		27				5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	e	F-7 -	City & State			6. Election Campaign Financing \$5.00 May Be					
Zip	Country	28	T - da					Added to Fees			
	Country 7ip Cou			ntry	,	8. This corporation has liability for intangible tax under s. 199.032.					
24	25 9. Name and Address of Curre	29 ent Registered Agent	30 Florida Statutes Yes No 10, Name and Address of New Registered Agent								
LON	G, ROLAND R., JR.	The Hogiston ou Agont		81	Name	10, Name and Address of New York	istorou Ayo	111			
	O KREIDT DRIVE		_								
	ANDO FL 32818			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)					
	WIDO 1 F 050 10		-	83							
			-	84	City		FL ⁸	5 Zip C	Code		
11. Pursuant office or re agent. I a	to the provisions of Sactions 607.05 egistered elept, or both, in the Stat m familiar with, and accept the object	02 and 607,1508, Florida Statut e of Horida Such change was gallins of, Section 607,0505, Fl	es, the ab authorized orida Stati	ove by t	named corpo the corporation	oration submits this statement for the puon's board of directors. I hereby accep	irpose of cha the appoint	inging its nent as	s registered registered		
SIGNATURE	Signature, typod or printed name of registered ag		L: Registered	Agent	t signature require	d when reinstating)	DATE				
12.		ND (SIRLCTOR)	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 12		
TITLE	I →;		1.A TIT	1.4 TITLE				Change	Addition 3		
NAME	LONG, ROLAND R., JR.		1.2 NAI	.P NAME];		
STREET ADDRESS	6599 KREIDT DRIVE		1.8 S1F	REE1 A	DDRESS						
CITY-ST-ZIP	ORLANDO FL		1.4 CIT	Y-\$1-	- ZIP						
TITLE	DST	☐ DETEJE	2.1 111	l€				Change	Addition C		
NAME	LONG, BEVERLY W.		2.2 NAI	ME	ŀ	•					
STREET ADDRESS	6599 KREIDT DRIVE		2.\$ STF	REET A	DDRESS						
CITY-ST-ZIP	ORLANDO FL	District	2.4 CI		- ZIP	<u> </u>					
TITLE		∐ DELFTE	3.6 101		1		L	Change	☐ Addition		
NAME			3.2 NAI								
STREET ADDRESS					DDRESS						
CITY-ST-ZIP TITLE		DELETE	3.4. CH		-ZIP		1	Charas	Adding.		
NAME		L' DECETE	4.1 101				LJ	Change	☐ Addition		
STREET ADDRESS			4. 2 NA		DODESC						
					DDRESS						
CITY-ST-ZIP TITLE		DELETE	4.4 CIT 5.1 TIT		- ZIP			Change	Addition		
NAME		C office	5.2 NAI				ل	Similar	noomen		
STREET ADDRESS					DDRESS						
CITY-ST-ZIP											
TITLE	***************************************	DELE1E	5.4 CIT 6.1 TITU		· CIC		···	Change	Addition		
NAME		<u></u>	6.2 NAI				니				
STREET ADDRESS					DORESS						
CITY-ST-ZIP			6.4 CIT								
44 Lala harak	by codify that the information are add	ad (a)	0.4 CH	1 - 51	ZII'	C-11 440 07/0\/\) Elid- 0i-/	1.5				

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 3 if changed or on an attackment with an address.