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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1997 8:00am

Secretary of State

1-13-97 941-494-0198

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H75638

(7)

SIGNATURE:

| B AND D | VEACH, INC. | | | | | | | |
|--|---|---|--------------------------|-----------------------|-----------------------------------|---|---|---|
| Principal Place | e of Business | Mailing Address | | | | - I JADIDII BILL IBFOF OLILO OLIDO HILOL IURI | MADIA DADIA BEBAI DADA | 8/9/4 BIBHI (BBH |
| B & D VEACH INC 3240 NE OLTMANNS ST ARCADIA FL 33821 US | | B & D VEACH INC 3240 NE OLTMANNS ST Arcadia Fl 34266-5646 US | | | 3. Date incorporated or Qualified | 3a. Date of La | | |
| | | | | | | 09/12/1985 | 03/14/199 |) 6 |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | <u></u> | Applied For |
| 21 | | 26 | ., | | , | 59-2604836 | | Not Applicable |
| Suite Apt. #, etc | | Suite, Apt #, etc. | | | | 5. Certificate of Status Desired | | 75 Additional se Required |
| City & State | FA | City & State | | | | 6. Election Campaign Financing | | |
| 23 | • | 28 | | | | Trust Fund Contribution | | .00 May Be |
| Zip | Country | Zip Country | | intry | | 8. This corporation has liability for intangible tax under s. 199.03: | | |
| 24 | 25 | 29 30 | | - | | | Yes No | |
| | 9. Name and Address of Curren | | | | | 10. Name and Address of New Re | gistered Agent | |
| BRO | WN, FLETCHER | | | 81 Na | ime | | | |
| | NORTH BREVARD | | | 82 Str | eot Addre | ess (P.O. Box Number is Not Acceptate | May | |
| ARCADIA FL 33821 | | | | ••• | our radio | ess (F.O. Box Number is Not Acceptable) | | |
| , | | | | 83 | | | | *************************************** |
| | | | | 84 Ci | | | 6 5 | Zip Code |
| | | | | | | oration submits this statement for the pon's board of directors. I hereby accept | PL I | · |
| SIGNATURE | Signature, typical or printed name of region of age | n and tile fappicable (NOT | | | | of when reinstalling) ADDITIONS/CHANGES TO OFFICE | DATE | |
| TITLE | PTD DELETE VEACH, B. R. | | | 1.1 TITLE | | | Cha | |
| NAME | | | 1.2 N | | | | | |
| STREET ADDRESS | 3240 NE OLTMANNS ST | 1 | | 1.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | ARCADIA FL 34266 | | 1.4 (1 | TY-ST-ZIP | | | | |
| TITLE | D DELETE | | 2.1 7(| 2.1 TITLE 2.2 NAME | | | Cha | inge 🔲 Addition |
| NAMÉ | VEACH, ALTA D. | 2.3 | | | | | | i |
| STREET ADDRESS | 3240 NE OLTMANNS ST | | 2.3 \$ | TREET ADDE | ESS | | | |
| CITY-ST-ZIP | ARCADIA FL 34266 | | | 2 4 CITY-ST-ZIP | | | | |
| TITLE | () DELETE | | 3.1 71 | | | | Cha | ange L Addition |
| NAME | | | 3.2 N | | | | | l |
| STREET ADDRESS | | | | TREET ADDE | 1 | | | |
| C:TY-ST-ZIP TITLE | | DELETE | 41 TI | DTY+ST-Z# | <u></u> | | Cha | ange Addition |
| NAME | | bttc/t | 4.2 N | | İ | | | inge |
| STREEL ADDRESS | | | | TREET ADDR | IESS | | | |
| OTY - ST - ZIP | | | | ITY-ST-21P | | | | : |
| TITLE | | DELETE | 5 1 TI | | | | ☐ Cha | ange Addition |
| NAME | | | 52 N | AME | | • | | |
| STREET ADDRESS | | | 535 | TREET ADDS | IESS | | | |
| CITY-ST-ZIP | · ¥ | | | ITY-ST-ZIP | - 1 | · | | |
| TITLE | | DELETE 61 | | TLE | | ☐ Cha | | ange Addition |
| NAME | | | 62 N | AME | | | | |
| STREET ADDRESS | | | 635 | TREET ADDA | RESS | | | |
| CITY - ST - 7(P | | · | | ITY-ST-7IF | | | | |
| informatio Lam an o | on indicated on this annual report or s | supplemental annual report is the receiver or trustee empoy | true and a wered to a | accurate | and that | in Section 119.07(3)(i), Florida Statute my signature shall have the same legal as required by Chapter 607, Florida S | al effect as if mad | ie under oath; that |