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FILED

Apr 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J13841 (8)

1. Corporation Name  
B.L. BROS., INC.

Principal Place of Business

% LEVY  
3140 S. OCEAN BLVD., #203 S.  
PALM BCH. FL 33480

Mailing Address

% LEVY  
3140 S. OCEAN BLVD., #203 S.  
PALM BCH. FL 33480-5674

3140 S. Ocean Blvd. ← Same

2. Principal Place of Business

21 203-4

Suite, Apt. #, etc.

22 Palm Beach, FL

23 33480

City & State

Zip

Country

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3. Date Incorporated or Qualified 05/12/1986	3a. Date of Last Report 10/15/1996
4. FEI Number 59-2706474	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

LEVY, BERNARD  
3140 SOUTH OCEAN BOULEVARD  
PALM BEACH 33480 FL 33401

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	LEVY, BERNARD	
STREET ADDRESS	3140 S OCEAN BLVD.	
CITY - ST - ZIP	PALM BCH. FL	
TITLE	V	DELETE
NAME	LEVY, BENJAMIN	
STREET ADDRESS	3140 S OCEAN BLVD.	
CITY - ST - ZIP	PALM BCH., FL	
TITLE	T	DELETE
NAME	LEVY, LILLIAN	
STREET ADDRESS	3140 S OCEAN BLVD.	
CITY - ST - ZIP	PALM BCH. FL	
TITLE	S	DELETE
NAME	LEVY, ELAINE	
STREET ADDRESS	31340 S OCEAN BLVD.	
CITY - ST - ZIP	PALM BCH., FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lillian Levy

Daytime Phone #

CR2E034 (9/96)