

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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
3140 S OCEAN BLVD
SUITE 203
PALM BEACH FL 33480
US

Mailing Address
3140 S. OCEAN BLVD
SUITE 203
PALM BCH. FL 33480
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/12/1986	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2706474	
24 Country		29 Country		5. Certificate of Status Desired	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				7. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				8. Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LEVY, BERNARD 3140 SOUTH OCEAN BOULEVARD PALM BEACH 33480 FL 33401				81 Name ELAINE LEVY			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				3140 South Ocean Boulevard			
				83 Suite 203			
				84 City PALM BEACH			
				FL 85 Zip Code 33480			

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 *Elaine Levy*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVY, BERNARD			1.2 NAME			
STREET ADDRESS	3140 S OCEAN BLVD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BCH. FL			1.4 CITY-ST-ZIP			
TITLE	V	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVY, BENJAMIN			2.2 NAME			
STREET ADDRESS	3140 S OCEAN BLVD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	PALM BCH., F L.			2.4 CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> DELETE		3.1 TITLE	VICE PRESIDENT / TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVY, LILLIAN			3.2 NAME	LEVY, LILLIAN		
STREET ADDRESS	3140 S OCEAN BLVD.			3.3 STREET ADDRESS	3140 S. OCEAN BLVD		
CITY-ST-ZIP	PALM BCH. FL			3.4 CITY-ST-ZIP	Palm Beach, FL		
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE	PRESIDENT / Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVY, ELAINE			4.2 NAME	LEVY, ELAINE		
STREET ADDRESS	31340 S OCEAN BLVD.			4.3 STREET ADDRESS	3140 S. OCEAN BLVD		
CITY-ST-ZIP	PALM BCH., F L.			4.4 CITY-ST-ZIP	Palm Beach, FL		
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I 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: *Elaine Levy*

July 10 -98

561
1-5884475

CR2E034 (5/98)