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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

	1996		DIVISION O	F CORPORA	HONS			
, Corporation	n Name	59600	(3)					
BCM II	NVESTMENTS, INC	i.						
nncipal Place	of Business	Mailir	ng Address			- I TABILITA DARA BANG ITANG BANA D	HAN OQUI ENDAN ANAN ONDII	
POST OFFICE BOX 10729 POST OFFICE BOX 107. P. O. BOX 950 P. O. BOX 950 PENSACOLA FL 32524 PENSACOLA FL 32524								
				·4		 Date Incorporated or Qualified 02/19/1987 	3a. Date of La: 01/20	•
Principal Pla	ace of Business	<u> </u>	ailing Address			4. FEI Number		Applied For
Suite, Apt. i	#, etc.	26 S	uite, Apt. #, etc.			NOT APPLICABLE	•••	Not Applicat
		27				5. Certificate of Status Desired		.75 Additional ee Required
City & State)	₁	ity & State			6. Election Campaign Financing	_ \$5	.00 May Be
Zip	Country	28		Count		Trust Fund Contribution		dded to Fees
	25	29	*	Count 30	, ,	This corporation has liability for Florida Statutes	r intangible tax und∈ is ∷ No	ers 199.032,
	9. Name and Address		ed Agent	11		10. Name and Address of New		
				8	1 Name			7. 7
	O, JAMES H. JR.			8	2 Street Add	ress (P.O. Box Number is Not Accepta	able)	
	NINTH AVENUE							
PENSAL	OOLA FL 32594			8	3			
				8	4 City		FL 85	Zip Code
KINTIIII & WILL	h, and accept the obligation	ns of, Section 607,050	05, Florida Statute:	780 DV TDA COI	rporation's boa	ration submits this statement for the p ard of directors. I hereby accept the ap	pointment as registe	ered agent. I am
SNATURE	Signature, typod or printed name of re	ns or, Section 607,050	ns, Florida Statutes (No. 185	Zed by the col S. DTE Registured Ac	ent signaturo require	ird of directors. I hereby accept the ap	DATE FICERS AND DIREC	CTORS IN 12
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SIGNATURE:

SIGNA NUBE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTO

2/8/96 904/479-2441