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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



J97550

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90169 034 ***150.00

BOLLOM	I INTERNATIONAL, INC.						
Principal Place	e of Business	Mailing Address			1 1881148 8110 18114 1880 81181 81114 8811 81811	MINIT 01011 01011	i Bibit aratt taat
2 N TAMIAMI TRAIL 2 NORTH TAMIAMI TRAIL						e	-
SUITE 408 SUITE 408 SARASOTA FL 34236 SARASOTA FL 34236					DO NOT WRITE IN THI	S SPACE	
US US					3. Date Incorporated or Qualifed		
					10/16/1987		
Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For
21 26					65-0006694		lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			L & Cortificate of Statue Desired L L			Additional Required	
City & State City & State 28			6. Election Campaign Financing Trust Fund Contribution \$5.00 M Added to				
Zip	Country	Zip	Country	,	8. This corporation owes the current year In	ntangible	
24	25 29 30		0		Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registered	Agent	
DAD	TIDOME ANTHOUS D		81	Name			ļ
Bartirome, anthohy D 2 North Tamiami Trail, suite 408			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34236			83				
O/112	ACOTA LE CILLO		63				
			84	84 City FL 85 Zip Code			Code
11 Pursuant	to the provisions of Sections 607 0502	and 607,1508, Florida Statutes.	the abov	L e-named cor	poration cubmits this statement for the nurnose of	of changing its	s registered
office or n	egistered agent, or both, in the State on m familiar with, and accept the obligati	of Florida. Such change was auth	onzed by	the corporat	tion's board of directors. I hereby accept the appo	intment as r	egistered
	Signature, typed or printed name of registered agent			nt signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECT	ODE IN 12
12.	OFFICERS AND	D DIRECTORS	13. 1.1 TITLE	— · · · · ·	ADDITIONS/CHANGES TO OFFICERS A	Change	
TITLE	——————————————————————————————————————		1.2 NAME				
NAME	10 FORFOT BIRGE			TADDRESS		•	
STREET ADDRESS CITY-ST-ZIP	KESTON, KENT ENGLAND	i	1.4 CITY-ST-ZIP				
TITLE	VSD VSD	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME				
STREET ADDRESS	A HIGH COOKE OF COOKE		2.3 STREE	TADDRESS			
CITY-ST-ZIP			2 4 CITY-5	ST-ZIP			
TITLE	- T		3.1 TITLE			☐ Change	Addition
NAME	Boccom, In attitute to the control of the control o		3.2 NAME				
STREET ADDRESS	•			TADORESS			ļ
CITY-ST-ZIP			3.4. CITY- 5 4.1 TITLE	ST-ZIP		Change	Addition
TITLE	VD					ப் வகர்	
NAME			4. 2 NAME	T ADDRESS			
STREET ADDRESS CITY-ST-ZIP	LUCIU AND ORDERS DESIGNATE		4.4 CITY-S				ļ
TITLE			5.1 TITLE	1 41		Change	Addition
NAME	IRONS, LORETTA P	_	5.2 NAME				
STREET ADDRESS	A NAME OF THE PARTY OF THE AGE		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	OADAGOTA DI DAGGO		5.4 CITY-S	iT-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
	İ		C 2 NAME	1			1

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 of 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 chapter or of the corporation of the receiver of the corporation of the receiver of the corporation or the receiver of the corporation
PALISTAIR REGERTSON

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

APRIL 1999 1-972 867 5677