PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # K34556 BG CONSULTING GROUP, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90102 022 ***150.00



Principal Place of Business Mailing Address									1811 81811 1881
11 HUNTLY CIRCLE 11 HUNTLY CIRCLE PALM BEACH GARDENS FL 33418 PALM BEACH GARD			NS FL 33418			DO NOT	WRITE IN TH	IS SPACE	
						3. Date incorporated or Qual 09/27/1988	fed		
Principal Place of Business 2a. Mailing Address						4. FEI Number		Apr	olied For
26						65-0080568		Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-			5. Certifcate of Status Desire	d □ /	\$8.75 A Fee Rec	
City & State		City & State	28			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country Zip			Country			8. This corporation owes the current year Intangible			
			30			Personal Property Tax.			
	9. Name and Address of Curre	nt Registered Agent		04	::	10. Name and Address of N	w Registere	d Agent	
CDO	COE DENNICE D			81	Name				
GROSSE, DENNISE D. 11 HUNTLY CIRCLE					Street Add	ress (P.O. Box Number is Not Acc	eptable)		
PALI	A BEACH GARDENS FL 33418			83				•	
				84	City	· · ·	F	85 Zip C	ode
office or re	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such change was	authorized	i by	the corporati	poration submits this statement for ion's board of directors. I hereby a	the purpose occept the app	of changing its ointment as reg	registered pistered
SIGNATURE									
	Signature, typed or printed name of registered age			l Agen	t signature require	ed when reinstating) ADDITIONS/CHANGES TO	DATE	AND DIRECTO	DC 1N 12
12.		ND DIRECTORS	13.	T1 E		ADDITIONS/CHANGES TO	UFFICERS A	☐ Change	Addition
TITLE	PT PURCE PURCE	L] DELETE	1						
NAME	GROSSE, BURCK E.		1.2 N					•	
STREET ADDRESS	11 HUNTLY CIRCLE		1		ADDRESS				
CITY-ST-ZIP	PALM BCH. GRDNS. FL	□ DELETE		TY-\$1	r-ZIP	4		☐ Change	Addition
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NAME									
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NAME					ADDDESS				
STREET ADDRESS				TY-S1	ADDRESS				
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NAME			5.1 N				•		_
	•		5.3 ST	TREET	ADDRESS				
STREET ADDRESS				TY-S1	1	•			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI		-			Change	Addition
NAME			6.2 N					_ •	
			6.3 S	TREET	ADDRESS			_	
STREET ADDRESS CITY-ST-7IP				TY-\$1				•	}
GUT-SI-ZIP I									

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, with all other like empowered.

SIGNATURE: