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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90059 003 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K82101

1. Corporation Name

Principal Place of Business

CITY: ST-ZIP

SIGNATURE:

B.E.R.S. CORPORATION

5913 NW 31 ST AVE									
US	• • • •	US				DO N	OT WRITE IN THIS	SPACE	
]					•	3. Date incorporated or 0		J OI ACE	
1						04/19/1989	guameu	,	
2. Principal I	Place of Business	2a. Mailing Address				4. FEI Number	<u></u>	· · · · ·	
21		<u> </u>						-	Applied For
Suite, Apt	# etc	26				65-0128195			Not Applicable
	. m, etc.	Suite, Apt. #, etc.			•	5. Certificate of Status De	sired		Additional
22 City 9 Ct	<u> </u>	27						Fee F	Required
City & Sta	te	City & State				6. Election Campaign Fin	ancing	\$5.00	May Be
23						Trust Fund Contributio	n L		to Fees
Zip				ountry 8. This corporation owes the current year Intangible					
24	25 29 30					Personal Property Tax		☐Yes	□No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address o	f New Registered	Agent	
			1	81	Name				
PAUL-HUS, JACQUES						a	··		
5913 N.W. 31 AVE.				82	Street Addre	ss (P.O. Box Number is Not	Acceptable)		
≟ FT.	Lauderdle fl 33309			83		2 (1.0 -0 A) 7 (1.	terment out a	9 9	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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,			T _E	84	City		\$ P. P. S.	85 Zip	Code
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11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the abo	ove-	named corpor	ration submits this statement	for the purpose of	changing it	s registered
ଧର agent. I a	registered agent, or both, in the State or familiar with, and accept the obligation	on Florida. Such change was autions of, Section 607,0505, Florid	tnorized t da Statute	by th fes	ne corporation	i's board of directors, I hereb	y accept the appoi	ntment as r	egistered
SIGNATURE		, , , , , , , , , , , , , , , , , , , ,			•	٠			
	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: F	Registered Ag	gent s	signature required v	when reinstating)	DATE		
12.	OFFICERS AND	D DIRECTORS	13.	_	<u> </u>	ADDITIONS/CHANGES		ID DIRECT	OPS IN 12
TITLE	DPS	☐ DELETE	1:1 TITLE	E	1	11-01-796	TO OTT TOERS AN	Change	Addition
NAME	PAUL-HUS, JACQUES		1.2 NAM	Œ	1 .	(2) (1) (1) (3)		[] Olidingo	L_J / ladiation
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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 or trustee of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee or