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

 PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K88049

(7)

B S E PROPERTIES, INC.

Principal Place of Business Mailing Address

FILED May 02 1997 8:00am Secretary of State



11422 SATELLITE BOULEVARD ORLANDO FL 32637-9226		11422 SATELLITE BOULEV/ ORLANDO FL 32837-8228	11422 BATELLITE BOULEVARD ORLANDO FL 32837-8228					
				4	3. Date incorporated or Qualified 05/15/1989	3a. Date of 03/01/1		oorl
2. Principa	I Place of Business	2a. Mailing Address			4. FEI Number		App	lied For
21		26			59-2947655		Not	Applicable
Suite, Ap	pt #, etc.	Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & St	tate	City & State			Election Campaign Financing Trust Fund Contribution		5.00 M Added to	
Ζφ 24	Country 25	Zip	Country 30	ł	This corporation has liability for in Florida Statutes	ntangible tax ı		199.032,
	9. Name and Address of C				10. Name and Address of New Re	gistered Ager	it	
C/	ARR, DWAINE		81	Name	JAMES R. KING			
105 E. ROBINSON ST. STE 301				82 Street Address (P.O. Box Number is Not Acceptable) 11422 SATELLITE BOULEVARD				
01	rlando fl. 32801		83					
			84	l " 0	PRLANDO	FL	32	9de 837
11. Pursua	ant to the provisions of Sections 60	7.0502 and 607.1508, Florida Statute	es, the abov	e-named cor	poration submits this statement for the pation's board of directors. I hereby accept	urpose of cha	nging its	registered
office d agent.	or registered agent, or both, in the I am familiar with, and accept the	State of Florida. Such change was a obligations of, Section 607.0505, Flo	iutnorized b irida Statute	y the corpora s.	ation's board of directors. I hereby accep	ot the appointr	nent as re	agistered
SIGNATUR	. //	Alleng				4/22/	97	
	Styriature, typi dior printed name of registe	red agent and title if applicable (NOTE		ant signature requ	uired when reinstating)	DATE		
12.	DP OFFICER	S AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC			Addition
TILLE	KING, JAMES R.	L1 otter	1.1 TITLE				ភាគាមួច	LJ Addition
NAME BENGLIANDO	ALAA TOURDEULUAL OR	rue:	1.2 NAME					
STREET ADDRES	ST. CLOUD FL	NYC		T ADDRESS				
TITLE	DST	DELETE	1.4 City-	51-21			Change	Addition
NAME	KING, CAROL		2.2 NAME			_		
STREET ADDRES	#01/05#1/1/10/ DB	rve		T ADDRESS				
City-St-Zif	ST. CLOUD FL		2. 4 CITY-	1				
TITLE	VP	DELETE	3.1 TITLE	-			Change	Addition
NAME	UDY, MICHAEL R.		32 NAME		•			•
STREET ADDRES	S 545 TIBERON COVE		3.3 STREE	T ADDRESS				
C(1Y - S1 - 7)P	LONGWOOD FL		3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAM(4. 2 NAME	1.				
STREET ADDRESS	55		4.3 STREE	r address				
CHY-S1-7IP			4.4 City-	ST - ZIP				
TI*LE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME		,			
STREET ADORES	SS S		5.3 STREE	TADDRESS 😳				
CITY-\$1-2IP			5.4 CITY -	ST - ZIP				
TITLE		DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRES	SS		6.3 STREE	T ADDRESS				
00Y-St-7iP			6.4 CITY-	ST-ZIP 1				

14. I do 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:

SIGNAFORE JAMES OR PRINCE NOW OF PRESS OF PRINCE DIRECTOR

4/1/97

407/857-3818

Daytime Phone #

0005029