

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L33422 (1)
1. Corporation Name
B. & B. WHITE, INC.

Principal Place of Business
14102 SW 142 AVE
MIAMI FL 33186
US

Mailing Address
C/O ATTORNEY R. ROSSI
1700 E. LAS OLAS BLVD. PENTHOUSE III
FT. LAUDERDALE FL 33301
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/04/1989

21	2. Principal Place of Business	2a	Mailing Address	4.	FEI Number	Applied For
	Suite, Apt. #, etc.	26	Ross 1 555 S. Federal Hwy		65-0158495	Not Applicable
22	City & State	27	200	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Boca Raton, FL	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	33432	30	USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

INTERNATIONAL ESCROW AGENTS, INC.
1700 E. LAS OLAS BLVD.
PENTHOUSE III
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	Suite 200
84	Boca Raton
85	FL
86	Zip Code
	33432

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/98

12. OFFICERS AND DIRECTORS

TITLE	PSTD	<input type="checkbox"/> DELETE
NAME	GARFINKEL, LINDA	
STREET ADDRESS	14102 SW 142 AVE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	KEUTHAN, GERALD	
STREET ADDRESS	14102 SOUTHWEST 142 AVENUE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	700002508347--1
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 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:

Linda Garfinkel Pres 4-30-98

FILED

98 MAY -1 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E034 (10/97)



ACCOUNT NO. : 072100000032

REFERENCE : 803697 7152554

AUTHORIZATION

Patricia T. [Signature]

COST LIMIT : \$ 150.00

ORDER DATE : May 1, 1998

ORDER TIME : 12:11 PM

ORDER NO. : 803697-025

CUSTOMER NO: 7152554

CUSTOMER: Ms. Linda Garfinkel
L G Management Service, Inc.
14761 S.w. 74th Lane

Miami, FL 33158

ANNUAL REPORT FILING

NAME: B. & B. WHITE, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stacy L Earnest

EXAMINER'S INITIALS: _____

RECEIVED
98 MAY -1 PM 1:56
DIVISION OF CORPORATION