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

PROFIT CORPORATION ANNUAL REPORT 1999

B.P. ENTERPRISES, INC.

1. Corporation Name

SIGNATURE:

DOCUMENT # L38263



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90092 005 ***150.00

407699-2108



Principal Place of Business Mailing Address 1015 SEMORAN BLVD. SUITE 1445 F701 CASSELBERRY FL 32707 US Mailing Address 4702 4701 CASSELBERRY FL 32707 US	DO NOT WRITE IN THIS SPACE
SUITE 1445 CASSELBERRY FL 32707 CASSELBERRY FL 32707	DO NOT IMPITE IN THIS SPACE
SUITE 1445 CASSELBERRY FL 32707 CASSELBERRY FL 32707	DO NOT WORK IN THIS SPACE
114	
05	3. Date Incorporated or Qualifed
	12/20/1989
D. Marillan Address	4, FEI Number Applied For
2. Principal Place of Business 1 214 Live Oaks Biva 26	59-2996691 Not Applicable
	\$8.75 Additional
Suite, Apt. #, etc.	5. Certificate of Status Desired Fee Required
2 27 City & State City & State	-
· · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country Zip Country	8. This corporation owes the current year Intangible
	Personal Property Tax.
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 81 Name	10. Teamo arto Francisco de Mario Barrera
DAIGLE, PAUL R.	
252 E SEMORAN BLVD	dress (P.O. Box Number is Not Acceptable)
SUITE 701	
CASSELBERRY FL 32707	
B4 City	85 Zip Code
1	FL V
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named cor	rporation submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corroffice or registered agent, or both, in the State of Plorida. Such change was authorized by the corporate agent. I am fartiur with, and accept the biggations of, Section 607.0505, Florida Statutes.	
SIGNATURE MAN Drustdent	12-31-98
Stgrature, typed or printed name of registered agent and title if app cable. (NOTE: Registered Agent signature require	red when reinstating) DATE
12. OFFICERS AND DIRECTORS 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 December Addition Addition
TITLE D DELETE 1.1 TITLE	
DAIGE, TAGE TO	Datgle, Hawl K.
STREET ADDRESS 1015 SEMORAN BLVD., SUITE 1445	214 Live Dans Blud
CITY-ST-ZIP CASSELBERRY FL 32707 1.4 CITY-ST-ZIP C	asselberry FL 32707
TITLE DELETE 2.1 TITLE	☐ Change ☐ Addition
NAME 2.2 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP 2.4 CITY-ST-ZIP	
TIME DELETE 3.1 TIME	☐ Change ☐ Addition
NAME 3.2 NAME	e de la companya del la companya de
STREET ADDRESS 3.3 STREET ADDRESS	
A COPY OF THE	
CITY-ST-ZIP 3.4. CITY-S1-ZIP TITLE □ DELETE 4.1 TITLE	☐ Change ☐ Addition
· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS 4.3 STREET ADDRESS 4.4 CODY OF THE	
CITY-ST-ZIP 4.4 CITY-ST-ZIP 4.5 TITLE 5.1 TITLE	☐ Change ☐ Addition
52 NAME	الله الله الله الله الله الله الله الله
NAME SA SIDERE ADDRESS	
STREET ADDRESS 5.3 STREET ADDRESS 5.4 STREET ADDRESS 5.4 STREET ADDRESS 5.5 STREET ADDRES	
CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP	. Change Addition
THE COLUMN TO SECOND TO SE	□ Change □ Modition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	
	n Section 119.07(3)(i), Florida Statutes. I further certify that the information ure shall have the same legal effect as if made under oath; that I am an juired by Chapter 607, Florida Statutes; and that my name appears in