

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **L76026** (8)

1. Corporation Name  
**BCB SURVIVAL EQUIPMENT, INC.**



Principal Place of Business: **7715 N W 56TH ST. 414 MIAMI FL 33166 US**  
Mailing Address: **7907 NW 53RD ST STE 310 MIAMI FL 33166 US**

3. Date Incorporated or Qualified: **05/21/1990**  
3a. Date of Last Report: **04/11/1995**  
4. FEI Number: **65-0200042**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **2677 SW 69TH COURT**  
21. Suite, Apt. #, etc.:  
22. City & State: **MIAMI FL**  
23. Zip: **33155** Country: **USA**  
24. Zip: **33155** 25. Country: **USA** 29. 30.

9. Name and Address of Current Registered Agent  
**LEWIS, RICHARD C.B.  
7715 N W 56TH ST.  
#414  
MIAMI FL 33166**

10. Name and Address of New Registered Agent  
81 Name: **RICHARD C.B. LEWIS**  
82 Street Address (P.O. Box Number is not acceptable): **2677 SW 69TH COURT**  
83  
84 City: **MIAMI** FL 85 Zip Code: **33155**

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 607.0504, Florida Statutes.  
SIGNATURE: *[Signature]* VP DATE: **4/22/96**

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	HOWELL, ANDREW	
STREET ADDRESS	7907 NW 53RD ST., STE 310	
CITY - ST - ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	LEWIS, RICHARD	
STREET ADDRESS	7907 NW 53RD ST., STE. 310	
CITY - ST - ZIP	MIAMI FL	
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 '92

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this report, or on an attachment with an address.

SIGNATURE: *[Signature]* RICHARD C.B. LEWIS VP DATE: **4/22/96** TELEPHONE: **305-261-9955**

CR2E034 (12/95)