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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Mar 09, 1999 8:00 am Secretary of State 03-09-1999 90087 041 ***150.00

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1999 DOCUMENT # L95460

BW I, INC.

Principal Place of Business Mailing Address							- 1 1081/1011 \$18 (\$164 \$151) \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$1
HOLLAND & KNIGHT 701 BRICKELL AVENUE. 30TH FLOOR MIAMI FL 33131 US			HOLLAND & KNIGHT 701 BRICKELL AVENUE. 30TH FLOOR MIAMI FL 33131 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/23/1990
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	
21 26			-				59-3937463 Not Applicable
Suite, Apt. #, etc. 22			Suite, Apt. #, etc.			_	5. Certificate of Status Desired
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip 24	Country 25	29	Zip	Coun	try		8. This corporation owes the current year Intangible Personal Property Tax.
	9. Name and Address of Currer		stered Agent				10. Name and Address of New Registered Agent
WING, JAMES D. HOLLAND & KNIGHT 701 BRICKELL AVENUE, 30TH FLOOR MIAMI FL 33131				1	31 32 33		ress (P.O. Box Number is Not Acceptable)
				1	34	City	FL 85 Zip Code
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	DP		☐ DELETE	1.1 TITL	E		☐ Change ☐ Addition
NAME	21,01,0 1,01,01,01,01			1 2 NAM	Œ	l	
STREET ADDRESS 2220 AVENUE OF THE STARS, 804 W.			1,3 STR	1.3 STREET ADDRESS			
CITY-ST-ZIP	LOS ANGELES CA 90067			1.4 CITY		Γ-ZIP	Channe C Addition
TITLE			☐ DELETE	2.1 TITL			Change Addition
NAME				2.2 NAM			•
STREET ADDRESS				2.3 STR 2.4 CIT		ADDRESS	*** ***
CITY-ST-ZIP TITLE			☐ DELETE	3.1 TITL	_	i - Zir	☐ Change ☐ Addition
NAME				32 NAM			·
STREET ADDRESS				3.3 STR	EET	ADDRESS	
CITY-ST-ZIP				3.4 CIT	Y-S	T-ZIP	
TITLE			☐ DELETE	4.1 TITL	E		☐ Change ☐ Addition
NAME				4. 2 NAI	ИE		·
STREET ADDRESS				43 STR	EET	ADDRESS	
CITY-ST-ZIP			C DELETE	4.4 CITS		T-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE	5.1 TITL 5.2 NAM			
NAME						ADDRESS	64.5
STREET ADDRESS				5.4 CITY			•
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TITL			☐ Change ☐ Addition
ALALAE				6.2 NAM	(F	1	

14. 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP