

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L95461** (4)

1. Corporation Name
BW II, INC.



Principal Place of Business

**HOLLAND & KNIGHT
701 BRICKELL AVENUE, 30TH FLOOR
MIAMI FL 33131
US**

Mailing Address

**HOLLAND & KNIGHT
701 BRICKELL AVENUE, 30TH FLOOR
MIAMI FL 33131
US**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**WING, JAMES D.
HOLLAND & KNIGHT
701 BRICKELL AVENUE, 30TH FLOOR
MIAMI FL 33131**

3. Date Incorporated or Qualified

08/23/1990

3a. Date of Last Report

02/14/1995

4. FEI Number

59-3037467

Applied For

Not Applicable

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

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 of person making this statement (must be a director, officer, or shareholder)

Signature of Registered Agent (must be a resident of Florida)

Date

OFFICERS AND DIRECTORS

12.

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D P

BRUNSWICK, AARON

**2220 AVENUE OF THE STARS, 804 W.
LOS ANGELES CA 90067**

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TITLE

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STREET ADDRESS

CITY - ST - ZIP

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13.

1. TITLE

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29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY - ST - ZIP

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SIGNATURE:

Aaron Brunswick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Aaron Brunswick

4/29/96 (310)552-9680
Date: Day: Month: Year:

CR2E034 (12/95)