FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 23 PM 2:58

DOCUMENT # M65315 (7)

1. Corporation Name
KEITH'S BVM, INC.

Principal Place of Business	Mailing Address
% KEITH LONDON 2020 NORTH 49TH AVENUE HOLLYWOOD FL 33021	% KEITH LONDON 2020 NORTH 49TH AVENUE HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/21/1988
3a. Date of Last Report: 03/03/1994

2. Principal Place of Business	2a. Mailing Address
21 P.O. Box 807	26 P.O. Box 807
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23 Hallandale, FL.	City & State 28 Hallandale, FL
Zip 24 33009 Country 25	Zip 29 33009 Country 30

4. FEI Number: 65-0020301 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LONDON, KEITH 2020 NORTH 49TH AVENUE HOLLYWOOD FL 33021	81 Name: Same 82 Street Address (P.O. Box Number is Not Acceptable): 613 Oleander Drive 83 84 City: Hallandale FL 85 Zip Code: 33009

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	DP	1.1 TITLE	☑ Change ☐ Addition
NAME	LONDON, KEITH	1.2 NAME	
STREET ADDRESS	2020 NORTH 49TH AVENUE	1.3 STREET ADDRESS	613 Oleander Drive
CITY ST ZIP	HOLLYWOOD FL	1.4 CITY ST ZIP	Hallandale, FL 33009
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	LONDON, RONNIE	2.2 NAME	
STREET ADDRESS	2020 NORTH 49TH AVENUE	2.3 STREET ADDRESS	
CITY ST ZIP	HOLLYWOOD FL	2.4 CITY ST ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 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)(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: Keith Scott London
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Keith Scott London

2/95 305 458-998

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