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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32136

(4)

BLACK-N-WHITE, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

(,

28. Mailing Address

City & State

Suite, Apt. #, etc.

Principal Place of Business	Mailing Address	
822 HIGHWAY 88 EAST DESTIN FL 32541	922 HIGHWAY 98 EAST DESTIN FL 32541	

26

FILED
Apr 28 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

3. Date Incorporated or Qualified

11/06/1990

59-3032952

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

3		28				Trust Fund Contribution	L.J	Added	to Fees
Zip	Country	Zip		Country	'	8. This corporation owes or ha	s paid the curr	ent year in	tangible
4	25	29	30			Personal Property Tax due J	une 30.] Yes [No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New	Registered A	gent	
, Bai	LL, JAMES K.			81	Name				
922	H IGHW AY 98 EAST			82	Street Addr	ess (P.O. Box Number is Not Acce	ntable)		
DES	STIN FL 32541			"	Olloot Madi	000 (1:0: Box 115/1001 15 110/11005	Stabley		
				83					
				84	Oib.			11 7:-	0-4-
				64	City		FL	85 Zip	Code
1. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Flor	ida Statutes, t	he above	e-named corp	oration submits this statement for t	he purpose of	changing i	ts registered
office or re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such char ations of, Section 607	nge was autho 7.0505, Florida	orized by Statutes	the corporat s.	ion's board of directors. I hereby a	scept the appo	intment as	registered
SIGNATURE	Signature, typed or printed name of registered ago	nt and title if applicable	(NOTE: Rec	gistered Age	ant signature requir	ad whon reinslating)	DATE		
2.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANGES TO O			RS IN 12
ITLE	PD		DELET E	1.1 TITLE				☐ Change	☐ Addition
WE	BALL, JAMES K.			1.2 NAME					
STREET ADDRESS			1.3 STREET	.3 STREET ADDRESS					
HTY-ST-ZIP	DE STIN FL		:	1.4 C/TY-S	T-ZIP				
TITLE	8		ELE TE	2.1 TITLE				Change	Addition
AME	OUTZEN, TRACY S.			2.2 NAME					
TREET ADDRESS	922 HIGHWAY 98 EAST			2.3 STREET	ADDRESS				
ITY-ST-ZIP	DESTIN FL		1	2. 4 CITY-5	ST-ZIP		• • • •		
ITLE	D	X	ELETE	3.1 TITLE				Change	Addition
AME	ME NDEL, JAKE	•		3.2 NAME					
TREET ADDRESS	P.O. BOX 77 N/A		I	3.3 STREET	ADDRESS				
aty-st-zip	MONTGOMERY AL		1	3.4 CITY-5	ST-ZIP				
ITLE	D		ELETE	4.1 TITLE				Change	Addition
IAME	Brewer, Alan			4. 2 NAME	i				
TREET ADDRESS	P.O. BOX 235006 N/A			4.3 STREET	ADDRESS				
ITY-ST-ZIP	MONTGOMERY AL		1	4.4 CITY-S	1				
TLE		D	ELETE	5.1 TITLE				Change	Addition
AME				5.2 NAME					
TREET ADDRESS			1	5.3 STREET	ADDRESS				
ITY-ST-ZIP			ľ	5.4 CITY-S					
TLE		□ D	DELETE 61					Change	Addition
IAME	•	_ _	1	6.2 NAME	}		•	-	
TREET ADDRESS				6.3 STREET	ADDRESS				
RITY-ST-ZIP				6.4 CITY-S					
	ertify that the information supplied w	ith this filma does no	t qualify for the			Section 119.07(3)(i). Florida Statute	as. I further cer	tify that the	information