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

APPROVED AND FILED
95 APR 27 AM 7:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000003365 (3)**

1. Corporation Name
B&V VENTURES, INC.

Principal Place of Business	Mailing Address
BARDMOOR VILLAGE 10801 STARKEY RD. STE. 106 LARGO FL 34647	BARDMOOR VILLAGE 10801 STARKEY RD. STE. 106 LARGO FL 34647

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/03/1992
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26: ~~627~~
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

4. FEI Number: 59-3155684 ☐ 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

ROBERT E. JULIEN
60 SYLVIA PLACE
OLDSMAR FL 34677

10. Name and Address of New Registered Agent

01 Name: ROBERT E. JULIEN
02 Street Address (P.O. Box Number is Not Acceptable): 12124 - 72ND WAY N.
03:
04 City: LARGO **FL** 05 Zip Code: 34643

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: Robert E Julien ROBERT E. JULIEN PRES 4/24/95
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	D	1.1 TITLE		☒ Change ☐ Addition
NAME	JULIEN, ROBERT E	1.2 NAME	JULIEN, ROBERT E.	
STREET ADDRESS	60 SYLVIA PLACE	1.3 STREET ADDRESS	12124 - 72ND WAY N.	
CITY-ST-ZIP	OLDSMAR FL 34677	1.4 CITY-ST-ZIP	LARGO, FL 34643	
TITLE	D	2.1 TITLE		☒ Change ☐ Addition
NAME	JULIEN, VINCE E	2.2 NAME	VINCE E. JULIEN	
STREET ADDRESS	60 SYLVIA PLACE	2.3 STREET ADDRESS	12124 - 72ND WAY N.	
CITY-ST-ZIP	OLDSMAR FL 34677	2.4 CITY-ST-ZIP	LARGO, FL 34643	
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)(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 if changed, or on an attachment with an address.

SIGNATURE: Robert E Julien ROBERT JULIEN 4/24/95 813-392-9010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0343340 CP