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

PROFIT CORPORATION ANNUAL REPORT **1999**	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90045 028 ***150.00

DOCUMENT # **P92000012374**

1. Corporation Name

BSR IMPORTS, INC.

Principal Place of Business	Mailing Address
13315 NORTH TAMIAMI TRAIL NAPLES FL 33963	13315 NORTH TAMIAMI TRAIL NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1992

2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		**26**		**65-0380755**	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired ☐	**$8.75** Additional Fee Required
22		**27**			
City & State		City & State		6. Election Campaign Financing ☐ Trust Fund Contribution	**$5.00** May Be Added to Fees
23		**28**			
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No	
24	**25**	**29**	**30**		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GERMAIN, ROBERT JR. 13315 NORTH TAMIAMI TRAIL NAPLES FL 33963	**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 607.0502 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 _____ DATE _7-23-99_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GERMAIN, STEPHEN L		1.2 NAME	
STREET ADDRESS	5777 SCARBOROUGH BLVD.		1.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH 43232		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GERMAIN, RICHARD B		2.2 NAME	
STREET ADDRESS	3885 W. DUBLIN GRANVILLE RD.		2.3 STREET ADDRESS	
CITY-ST-ZIP	DUBLIN OH 43017		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GERMAIN, ROBERT JR.		3.2 NAME	
STREET ADDRESS	13315 NORTH TAMIAMI TRAIL		3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33963		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	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 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.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E034 (11/98)