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 #

P93000001995 (8)

BPC CORPORATION

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			
1110 BRICKELL AVE. STE 430	·	400		
MIAMI FL 33131	1110 BRICKELL AVE. STE MIAMI FL 33131	430		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address			01/18/1993
21	26			4. FEI Number Applied For
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			65-0554117 Not Applicable
22	27			5. Certificate of Status Desired Fee Required
City & State	City & State			8. Election Campaign Financing \$5.00 May Be
23	28			Trust Fund Contribution Added to Fees
Zip Country 25	Zip	Countr	У	8. This corporation owes or has paid the current year intangible
24 25 25 Name and Address of Curre		30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
HESS, THOMAS J		81	Name 1	
601 BRICKELL KEY DR.		<u> </u>	1 17	IESS, THOMAS S
STE 805		82	Street Add	dress (P.O. Box Number is Not Acceptable) A BRICKELL KEY DR- SUTE 407
MIAMI FL 33131		83		R-VOISIER CENTER.
		84	City	11AM1 FL 85 Zip Code ろう
11 Pursuant to the provisions of Sections 607.050	02 and 607 1508. Florida Statuto	c the abov		TIA MI FL 3 3 3 3 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	a at Florida. Suca caanaa wae at	III DAZIZAKI D	W the certeers	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE		ida Statute	98.	
Signature typed or printed name of registered age 12. OF FICERS AN	on and title of applicable (NOTE ID DIRECTORS		gent signature requ	quired when reinstating) DATE
TITLE PD	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME BORG, LOUIS-CLAUDE		1.2 NAME		El cuarge C Addition
STREET ADDRESS 1110 BRICKELL AVE. STE 43	30	1	T ADDRESS	
CITY-ST-ZIP MIAMI FL 33131		1.4 CITY-		
TITLE	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREE	1 ADDRESS	
CITY-ST-ZIP		2. 4 CITY-	ST-ZIP	
TITLE	☐ DEFELE	3.1 TITLE		Change Addition
NAME		3.2 NAME	ľ	
STREET ADDRESS			T ADDRESS	
CITY-ST-ZIP TITLE	DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	Change Addition
NAME		4.1 DILE 4 2 NAME		L Change L Addition
STREET ADDRESS		1	t address	
CITY-ST-ZIP		4.4 CITY-1		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREE	T ADDRESS	
CITY-ST-ZIP		5.4 CITY - 5	ST-ZIP	
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREE	T ADDRESS	
CITY-ST-ZIP	What is the same of the same o	6.4 CITY - S		n Section 119 07/9Vi) Election Statutes I further continue the information
ta - I nereny cerrity inal-for latormation substitud w	ath thie taine done not auglify for	the evene	stion atotad in	n Continu 110 07(3)(i) Elected Cinteres I forther continue the information

I hereby certify that the algorithms in 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 armust applied as if made under oath; that I am an officer or director of the provision 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 flock and provided in a statute of the provision 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 flock.

100 00 1000 Gad 2711 3.4