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 #

FILED Feb 23 1998 8:00am Secretary of State

B & G	INVESTMENTS OF GEOF	•	') 			######################################
Principal Place of Business Mailing Address					i ideiten iin idide (iste neit) attit tätet neite	II WAN THAT I CANA MINT IND IND
4505 131ST AVE N 4505 131ST AVE N						
CLEARWATER FL 34622 CLEARWATER FL 34622					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					04/23/1993	
2. Principal Place of Business 28. Mailing Address				····	4. FEI Number	Applied For
21		26	26		59-3177542	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27					5. Certificate of Status 265/160	Fee Required
City & Sta	te	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23			Zip Country		Trust Fund Contribution	Added to Fees
Zip	·		├ ──	try	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 g. Name and Address of Curr	ent Registered Agent	30		10. Name and Address of New Registers	
18/	Ti			Name	10,	
WEST, WILLIAM B 4505 131ST AVE N			ļ.	<u> </u>		
	LEARWATER FL 34622		[3	82 Street Address (P.O. Box Number is Not Acceptable)		
· ·	SEATURIENT L 04022		1	33		····
			Ļ			
				City	F	85 Zip Code
12.	Signature, typed or protect harne of registerest OF FICERS A	ND DIRECTORS	13.		uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P [_] DELETE		117171	1		Change Addition
NAME	WEST, WILLIAM B		1.2 NAME			
STREET ADDRESS	OLEANIMATED EL			EET ADDRESS		
CITY-ST-ZIP TITLE			2.1 I(IL	r-ST-ZIP		Change Addition
NAME	·		2.2 NAM	Y		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP	ATLANTA GA			Y-ST-ZIP		
TITLE		DELETE 3.			——————————————————————————————————————	Change Addition
NAME			3.2 NAN	ne l		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP			34 CIT	Y-ST-ZIP		
TITLE	DELETE		4 1 TITL	E		Change Addition
NAME			4 2 NAI	NE		
STREET ADDRESS			4 3 STR	EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		Obanna I I Adams
TITLE	☐ DELETE		5 1 TITL			Change Addition
NAME			5.2 NAN			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP TITLE			5.4 CITY 6.1 TITL	-ST-ZIP		Change Addition
		- Decent	6.2 NAM			
NAME STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
VICE OF EU	1		0.4 (111	-1 · 2 · ·		

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 suppliemental 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 any ittachment with an address.

2/13/98