FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 FEB 17 PM 3:25

DOCUMENT # P93000031417 (7)

1. Corporate Name

B.S.B., INC.

Principal Place of Business	Mailing Address
5900 S.W. 73RD ST. STE. #200 MIAMI FL 33143 US	5900 S.W. 73RD ST. STE. #200 MIAMI FL 33143 US

3. Date Incorporated or Qualified	04/29/1993
3a. Date of Last Report	05/01/1994
4. FEI Number	65-0439980

2. Principal Place of Business	2a. Mailing Address
21 5901 S.W.74th St.	26 5901 S.W.74th St.
22 Suite, Apt. #, etc. 407	27 407
23 City & State Miami, Fl.	28 Miami, Fl.
24 Zip 33143 — 25 County DADE	29 Zip 33143 — 30 County DADE

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

BROWN, GARY A
5900 S.W. 73RD ST.
STE. #203
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name: BROWN, GARY A.
82 Street Address (P.O. Box Number is Not Acceptable): 5901 S. W. 74th St.
83 Suite 407
84 City: Miami,
FL
85 Zip Code: 33143

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

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BROWN, GARY A
STREET ADDRESS	5900 S.W. 73RD ST., #203
CITY-ST-ZIP	MIAMI FL 33143
TITLE	VD
NAME	SCHWARTZ, JONATHAN
STREET ADDRESS	8902 N. DALE MABRY STE. #202
CITY-ST-ZIP	TAMPA FL 33614
TITLE	STD
NAME	BROWN, STEVEN
STREET ADDRESS	1001 S. BAYSHORE DR., #1804
CITY-ST-ZIP	MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☒ Change ☐ Addition
NAME	GARY A. BROWN	
STREET ADDRESS	5901 S. W. 74th St. #407	
CITY-ST-ZIP	Miami, Fl. 33143	

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, Florida Statutes. I further certify that the information indicated on this report or supplemental 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: [signature] 2/8/95 (305) 662-8999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0183300 CP