

PROFIT
CORPORATION
ANNUAL REPORT

1999 AMENDED



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

Amended

DOCUMENT # P93000034111

1. Corporation Name

BES AMERICA, INC.

99 APR 26 PM 1:33

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1007 E. Las Olas Blvd.
Ft. Lauderdale, FL 33301

1007 E. Las Olas Blvd.
Ft. Lauderdale, FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5/7/93

2. Principal Place of Business

2a. Mailing Address

21 1007 E. Las Olas Blvd.
Suite, Apt. #, etc.

26 1007 E. Las Olas Blvd.
Suite, Apt. #, etc.

4. FEI Number

65-0405386

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Jesse L. Briggs
1007 E. Las Olas Blvd.
Ft. Lauderdale, FL 33301

81 Name

William R. Clayton, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

100 S.E. 2nd St.

83

17th Fl.

84 City

Miami

FL

85 Zip Code
33131

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

(William R. Clayton)

4-13-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
Jesse L. Briggs
STREET ADDRESS
1007 E. Las Olas Blvd.
CITY-ST-ZIP
Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME
Blanca F. Briggs
STREET ADDRESS
1007 E. Las Olas Blvd.
CITY-ST-ZIP
Ft. Lauderdale, FL 33301

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/99

Daytime Phone #

CD7EN34 141001