## 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 # P93000040753 (4)

## **FILED** Feb 06 1998 8:00am Secretary of State

BAMACOR ENTERPRISES, INC.						- 18616861 tra 18164 61111 Shite Belli Affili Affili			
<u> </u>									<b>                                    </b>
Principal Plac	e of Business	Mai	Mailing Address					// <b>0</b> 14 0 0 10 14 0 0 1	81108 4111 1 <b>3</b> 81
7101 NW 108TH AVE 7101 NW 108TH /									
TAMARAC FL 33321			TAMARAC FL 33321				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							06/09/1993		
2. Principal Place of Business			2a, Mailing Address				4, FEI Number		Applied For
Suite, Apt. #, etc.			<b>26</b>				65-0416503		Not Applicable
22			27				5. Certificate of Status Desired	, -	5 Additional Required
City & State			City & State				6. Election Campaign Financing		O May Be
23			28				Trust Fund Contribution		ed to Fees
Zip	Country 7ip		<b>Z</b> ip	Country			8. This corporation owes or has paid the	current year	Intangible
24				30	)		Personal Property Tax due June 30. Yes No		
ļ	9. Name and Address of Curre	nt Registe	ered Agent		81	Name	10. Name and Address of New Registere	d Agent	
	NDERS, BRUCE				01	ivairie			
7101 NW 108TH AVE.				82 Street Add			ess (P.O. Box Number is Not Acceptable)		
TAMARAC FL 33321					83				
Į									
					84	City	F	85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 60	7.1508, Florida Statu	es, the a	 DOV8	e-named corpo	oration submits this statement for the purpose	of changing	g its registered
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									
OIGHATORE.	Signature, typed or pointed name of registered ag-			L Registere	d Age	of signature require			
12.	OFFICERS AN	D DIRECT	ORS DELETE	13,			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	S Landers, Michelle		LT OFFE IF	1.1 T)				Chang	e 🛄 Addition
NAME STREET ADDRESS				1.2 NAM		4000000			
	CAMADAO EL		_		1.3 STREET ADDRESS				
TITLE	VPD DELETE			1.4 C(TY - ST - ZIF 2.1 T(TLE			Change	e Addition	
NAME	LAMDERS, MICHELLE		-	2.2 NAME				•	
STREET ADDRESS				2.3 \$1		ADDRESS			
CITY-ST-7IP	TAMARAC FL			2 4 CIT		ST - ZiP			ĺ
TITLE			☐ DELETE	311	LF			Change	e Addition
NAME				3.2 N/	ME				
STREET ADDRESS				3351	REFT	ADDRESS			
CITY-ST-ZIP			D DELETE			ST - 7/P		<u> </u>	- F1 × 1000
TITLE			L] DELETE	4.1 TI				∐ Changi	e 🔲 Addition
STREET ADDRESS				4.2 N		*ODDEDO			1
CITY-ST-ZIP				4.3 S1		ADDRESS I			
TITLE			DELETE	5.1 11		1-211		Change	e Addition
NAME .				5.2 NA		}		•	}
STREET ADDRESS				5.3 \$1	HELI	ADDRESS			
CITY-ST-ZIP				5 4 C1	Y - S	1 - 7IP			
TITLE			DELETE	61 III	(F			Change	e Addition
NAME				6 2 NA	ME				
STREET ADORESS				6.3 S1	REET	ADDRESS			
CITY-ST-ZIP		in at 1 2 2 2	^x <del></del>	6.4 CI	•		2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
14. I nereby c	errity that the information supplied w	ion Uns Idir Januarda	ng does not quality fr	or the exe	mpi	iion stated in S	Section 119.07(3)(i), Florida Statutes. I further	certify that the	ne information

SIGNATURE: