

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000042947 (0)

1. Corporation Name

BPS ACQUISITION CORP.

Principal Place of Business
6115 MIRAMAR PARKWAY F
MIRAMAR FL 33023

Mailing Address
6115 MIRAMAR PARKWAY F
MIRAMAR FL 33023

APPROVED
AND
FILED

95 MAR -2 PM 3: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/16/1993		3a. Date of Last Report 03/30/1994	
4. FEI Number 65-0417932		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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent LEX JENNIFER L. 6115 MIRAMAR PARKWAY SUITE F MIRAMAR FL 33023		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <u>MIRAMAR</u> FL 85 Zip Code <u>33023</u>	
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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 registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☒ Change ☐ Addition
NAME	LUMLEY, ROBERT L	1.2 NAME	
STREET ADDRESS	12030 N.W. 35TH ST.	1.3 STREET ADDRESS	12030 NORTHWEST 35TH STREET
CITY-ST-ZIP	SUNRISE FL 33323	1.4 CITY-ST-ZIP	
TITLE	DT	2.1 TITLE	☒ Change ☐ Addition
NAME	LEX-LUMLEY, DEBORAH L	2.2 NAME	
STREET ADDRESS	12030 N.W. 35TH ST.	2.3 STREET ADDRESS	12030 NORTHWEST 35TH STREET
CITY-ST-ZIP	SUNRISE FL 33323	2.4 CITY-ST-ZIP	
TITLE	DVP	3.1 TITLE	☒ Change ☐ Addition
NAME	LEX, JR, ALBERT	3.2 NAME	LEX, JR, ALBERT F.
STREET ADDRESS	5420 SOUTHWEST 56TH PLACE	3.3 STREET ADDRESS	5420 HAWKES BLUFF
CITY-ST-ZIP	FT. LAUDERDALE FL 33320 33332	3.4 CITY-ST-ZIP	FORT LAUDERDALE FL 33332
TITLE	D	4.1 TITLE	☒ Change ☐ Addition
NAME	LEX, JR., JENNIFER L	4.2 NAME	
STREET ADDRESS	5420 SOUTHWEST 56TH PLACE	4.3 STREET ADDRESS	5420 HAWKES BLUFF
CITY-ST-ZIP	FT. LAUDERDALE FL 33320 33332	4.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33332
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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(3)(k), 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, this report, or on an attachment with an address.

SIGNATURE:

Robert L. Lumley

ROBERT L. LUMLEY

2/5/95

305-522-2222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number