

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000055441 (8)

1. Corporation Name

BJORK INDUSTRIES, INC.



Principal Place of Business

**908 13TH ST. N.
NAPLES FL 33940
US**

Mailing Address

**1480 GOLDEN GATE PARKWAY
STE. 103-339
NAPLES FL 33942**

3. Date Incorporated or Qualified
08/04/1993

3a. Date of Last Report
03/03/1995

2. Principal Place of Business

2a. Mailing Address

21 **3661 ARNOLD AVE**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **NAPLES, FL.**

27

City & State

City & State

23 **NAPLES, FL.**

28

Zip

Country

Zip

Country

24 **33942**

25

29

30

4. FEI Number

65-0429063

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

10. Name and Address of New Registered Agent

**MAST, CHRISTOPHER E
1207 THIRD STREET SOUTH
STE. 7
NAPLES FL 33940**

81 Name

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

83

84 City

FL

85 Zip Code

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 the individual

Signature typed or printed name of registered agent and the individual

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **S FRENCH, JODY L**
STREET ADDRESS **1810 55TH STREET SOUTH WEST**
CITY-ST-ZIP **NAPLES FL**

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS **411 14TH ST. S.E.**
14 CITY-ST-ZIP **NAPLES, FL. 33964**

TITLE ☐ DELETE
NAME **T ROCHE, MARGARET A**
STREET ADDRESS **4712 25TH PLACE SOUTH WEST**
CITY-ST-ZIP **NAPLES FL**

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **V BURK, ROBERT C**
STREET ADDRESS **908 19TH STREET NORTH**
CITY-ST-ZIP **NAPLES FL**

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS **4654 25TH AVE S.W.**
34 CITY-ST-ZIP **NAPLES, FL. 33999**

TITLE ☐ DELETE
NAME **PC BURK, GEORGE R**
STREET ADDRESS **908 13TH STREET NORTH**
CITY-ST-ZIP **NAPLES FL**

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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 if changed, or on an attachment with an address.

SIGNATURE:

George R. Burk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE R. BURK

6/6/96

941-435-1835
Date of Filing

CR2E034 (12/95)