

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000061891 (6)

1. Corporation Name

BAM MANAGEMENT CORP.



Principal Place of Business

Mailing Address

9031 NORTH MILITARY TRAIL
LAKE PARK FL 33418
US

3053 NORTH OCEAN BOULEVARD
FORT LAUDERDALE FL 33308
US

3. Date Incorporated or Qualified

09/03/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0453682

Applied For

Not Applicable

5. Certificate of Status Desired

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\$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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9031 North M. Military Trail

Lake Park FL

33418

US.

9. Name and Address of Current Registered Agent

MANGNITZ, BERNIE
3053 NORTH OCEAN BOULEVARD
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

FRANK PATARNO

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

6007 NW 77th Terr.

83

84 City

PARKLAND

FL

85 Zip Code

33067

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 of person authorized to accept appointment as registered agent (if applicable)

(NOTE: Registered Agent's signature required when reinstating)

FRANK PATARNO

6/1/96

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME SANTANGELO, CARL G
STREET ADDRESS 3000 N. FED HWY, BLDG. 2, STE. 2000
CITY-ST-ZIP FT LAUDERDALE FL 33306

☒ DELETE

TITLE VP
NAME MANGNITZ, BERNIE
STREET ADDRESS 3053 NORTH OCEAN BOULEVARD
CITY-ST-ZIP FORT LAUDERDALE FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

P
FRANK PATARNO
6007 NW 77th Terr.
PARKLAND, FL 33067

VP
CAROL PATARNO
7600 Mirabella Dr.
BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK PATARNO

6/1/96

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