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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000012723 (0)

1. Corporation Name

BEVILLE CORPORATION

Principal Place of Business

1421 S. DIXIE FREEWAY
NEW SMYRNA BEACH FL 32168

Mailing Address

1421 S. DIXIE FREEWAY
NEW SMYRNA BEACH FL 32168-7804



3. Date Incorporated or Qualified

02/15/1994

3a. Date of Last Report

04/24/1996

2. Principal Place of Business

21 877 Quail Run

Suite, Apt. #, etc.

22 City & State

23 Ormond Beach, FL

24 Zip 32174

Country

25 USA

2a. Mailing Address

26 877 Quail Run

Suite, Apt. #, etc.

27 City & State

28 Ormond Beach, FL

29 Zip 32174

Country

30 USA

4. FEI Number

59-3228621

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

OPPENHEIMER, MICHAEL

1421 S. DIXIE FREEWAY

NEW SMYRNA BEACH FL 32168

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83 877 Quail Run

84 City

Ormond Beach, FL

85 Zip Code

32174

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME OPPENHEIMER, MICHAEL

STREET ADDRESS 1421 S. DIXIE FREEWAY

CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE P ☐ DELETE

NAME STUDNER, SCOTT

STREET ADDRESS 2 HIGHLAND OAKS TRAIL

CITY-ST-ZIP ORMOND BEACH FL

TITLE ST ☐ DELETE

NAME OPPENHEIMER, BRIAN I M

STREET ADDRESS 3 SPRINGWOOD TRAIL

CITY-ST-ZIP ORMOND BEACH FL

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

1.1 TITLE ☒ Change ☐ Addition

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

14. I do 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 in an attachment with an address.

SIGNATURE:

M. Oppenheimer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

904-760

6444

Daytime Phone #

CR2E034 (9/96)