

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

25 MAR 14 AM 8:24

DOCUMENT # P94000022340 (1)

1. Corporation Name

B.P.S. CORPORATION

Principal Place of Business

414 N ATLANTIC AVENUE
DAYTONA BEACH FL 32118

Mailing Address

414 N ATLANTIC AVENUE
DAYTONA BEACH FL 32118

DO NOT WRITE IN THIS SPACE.

2. Principal Place of business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

26 Mailing Address

27 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

03/23/1994

3a. Date of Last Report

4. FEI Number

53-3231586

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

7. This corporation has liability for intangible tax under S. 109.032, Florida Statutes

Yes No

8. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL, CHARTERED
343 ALMERA AVENUE
CORAL GABLES FL 33134

10. ~~STATEMENT OF AGENT FOR SERVICE OF PROCESS~~

81. Name *HERMAN SINGH CEG*

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

500 E. SENORAV BLVD STE. 2-5

83.

84. City *MIAMI* FL Zip Code *32127*

11. Pursuant to the provisions of Sections 607.0507 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 conditions of Section 607.0505, Florida Statutes.

SIGNATURE: *Herman Singh*

DATE: *2/2/95*

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

101	P SODHI, BHUPINDER S 414 N ATLANTIC AVENUE DAYTONA BEACH FL 32118	11 NAME 12 NAME 13 STREET ADDRESS 14 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
102		21 NAME 22 NAME 23 STREET ADDRESS 24 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
103		31 NAME 32 NAME 33 STREET ADDRESS 34 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
104		41 NAME 42 NAME 43 STREET ADDRESS 44 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
105		51 NAME 52 NAME 53 STREET ADDRESS 54 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
106		61 NAME 62 NAME 63 STREET ADDRESS 64 CITY-STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I solemnly certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(6)(a), Florida Statutes. I further certify that the information indicated on the 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 survivor or trustee only bound 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 "X" mark.

SIGNATURE: *X*

PRINTED NAME AND TITLE OR POSITION OF SIGNING OFFICER OR DIRECTOR

X 2/2/95 X (94)2524-0252