## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000022675 (0)

BACOM, INC.

STREET ADDRESS

CITY-ST-ZIP

<del> </del>			····	· · ·		88348 36868 99848 81111 1888) 8943 1883
Principal Place of Business Mailing Address						
C/O RJS 201 S. BISCAY	NE BLVD SUITE 1500	201 S. BISCAYNE	C/O RJS 201 S. BISCAYNE BLVD., SUITE \$500			
MIAMI FL 33131		MIAMI FL 33131-	MIAMI FL 33131-4308		3. Date incorporated or Qualified 03/24/1994	3a. Date of Last Report 03/07/1996
2. Principal P	lace of Business	2a. Mailing Addr	ess		4. FFI Number	Applied For
21		26			65-0494576	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip		untry	8. This corporation has liability for in	ntangible tax under s. 199.032, Yes 44 No
24	25 9. Name and Address of Curr	29  ent Registered Agent	[30]	T	Florida Statutes  10. Name and Address of New Reg	
COF	PORATION COMPANY OF MI			81 Name	10.	, and a second s
	S. BISCAYNE BLVD.	*****		05	(1 10.0 G N N - 1 - 1 N 1 A	
SUITE 1500				82 Street Address (P.O. Box Number is Not Acceptable)		
	MI FL 33131			63		
				84 City		<b>85</b> Zip Code
				,		FL
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Floridae	da Statutes, the a	bove-named cor	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered
agent. I a	m familiar with, and accept the obl	igalions of, Section 607.	0505, Florida Sta	tutes.	mores board of directors. Thereby accep	t the thypomunerit as registered
SIGNATURE						
12.	Signature, typed or printed name of registered a	ND DIRECTORS	(NOTE: Hogisten	ed Agent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIRECTORS IN 12
TITLE	DPST	DI		DLE	7,001110110,010111010101010110	Change Addition
NAME	RIVERA-KONG, BERNAL			IAME		-
STREET ADDRESS 1500 MIAMI CENTER, 201 S. BISCAYNE BLVD.			1.3 \$	JRECT ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4.0	ITY-ST-ZIP	·	
TITLE	DELETE			ITLE		Change Addition
NAME			2.21	IAME		
STREET ADDRESS			235	TREET ADDRESS		
CITY-ST-ZIP				CHTY-S1-ZIP		
TITLE	☐ DELETE			ILE		☐ Change ☐ Addition
NAME CIDECT ADDRESS			3.21	1		
STREET ADDRESS CITY-ST-ZIP				TREET ADDRESS CITY-ST-ZIP		
TITLE		Di				Change Addition
NAME			F	NAME		
STREET ADDRESS				TREE LADDRESS		
CITY-ST-ZiP				SITY-S1-ZIP		
TITLE		D				Change Addition
NAME			5.21	IAME		
STREET ADDRESS			5.3 8	TREET ADDRESS		
CHTY-ST-ZIP				DITY-ST-ZIP		
TITLE		□ DI				Change Addition
NAME	• .		621	IAMI )		1

63 STREET ADDRESS

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 eath, 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

Rothal Divora-Kong 44/4/47 (205) 250-63