

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90101 005 ***158.75

DOCUMENT # P94000029378

1. Corporation Name

BESSENT ENTERPRISES, INC.



Principal Place of Business

16459 62ND ROAD N
LOXAHATCHEE FL 33470
US

Mailing Address

1128 ROYAL PALM BEACH BLVD #132
ROYAL PALM BEACH FL 33411
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1994

4. FEI Number

65-0485052

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 P.O. Box 1099

27 Suite, Apt. #, etc.

28 City & State

29 Zip Country

30

9. Name and Address of Current Registered Agent

BESSENT, FRANCES

1128 ROYAL PALM BEACH BLVD #132
ROYAL PALM BEACH FL 33411

P.O. Box 1099
Loxahatchee
FL 33470

10. Name and Address of New Registered Agent

81 Name

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

16459 62nd Road North

84 City Loxahatchee

FL

85 Zip Code 33470

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

Jan. 15, 1999

12. OFFICERS AND DIRECTORS

TITLE DPS
NAME BESSENT, FRANCES
STREET ADDRESS 1128 ROYAL PALM BEACH BLVD #132
CITY-ST-ZIP ROYAL PALM BEACH FL 33411 Loxahatchee, FL 33470

TITLE P
NAME BESSENT, MICHAEL C.
STREET ADDRESS 1128 ROYAL PALM BEACH BLVD #132
CITY-ST-ZIP ROYAL PALM BEACH FL 33411 Loxahatchee, FL 33470

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
16459 62nd Rd N.
Loxahatchee, FL 33470

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
16459- 62nd Rd. N.-
Loxahatchee FL 33470

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 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 on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE (Typed or printed name of signing officer or director)

Jan 15, 1999

561-793-6109

CR2E034 (1/98)