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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATION\$

DOCUMENT # BILLY-JEAN, INC.

P94000038587 (9)

**FILED** Feb 10 1998 8:00am Secretary of State



				<u> </u>	
Principal Place of Business Mailing Address					
12401 W OKEECHOBEE RD 12401 W OKEECHOBEE RE			•		
BOX 258 HIALEAH GARDENS FL 33016		BOX 256 HIALEAH GARDENS FL 33016		DO NOT WRITE IN THIS SPACE	
US US		US		3. Date Incorporated or Qualified	
-				05/23/1994	į
2. Principal Pla	ace of Businessfk	2a. Mailing Address		4. FEI Number	Applied For
21 130	11 N.W. 5 6F	26 3061 N	111 Ettek	- 65-0494813	Not Applicable
Suite, Apt.	i, etc.	Suite, Apt. #, etc.	1013 SI		\$8.75 Additional
22 Plan	Tation fllt	27		5. Certificate of Status Desired	Fee Required
City & Stale	, , , , , , , , , , , , , , , , , , ,	Ny & State	_1.	6. Election Campaign Financing	\$5.00 May Be
23		28 MANTATIO	n FIA	Trust Fund Contribution	Added to Fees
Zip	Country	グスススプレ	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24 332	125 25 45	29 33333 3	<u> </u>		☐ Yes ☐ No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	Agent
KEMP, WILLIAM			81 Name		
13801 NW 5TH ST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33325				,	
			83		
			84 City		85 Zip Code
			G4 City	FL	85 Zip Code
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, and program the obtaining of Section 607 605. Florida Statute of Florida Stat					
SIGNATURE Signature, typed or profiled cambrid treat force agent and filled applicable (NOTE Registered Agent Signature required when reinstating)  DATE					
12,	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	KEMP, WILLIAM		1.2 NAME		
STREET ADDRESS	13061 NW 5TH ST		1.3 STREET ADDRESS		Įi
CITY-ST-ZIP	PLANTATION FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE.	2.1 TITLE		Change Addition
NAME	KEMP, JEAN		2.2 NAME		
STREET ADDRESS	13601 NW 5TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ŀ
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	**************************************	☐ DELETE	5.1 TETLE		☐ Change ☐ Addition
NAME		•	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 City-St-ZiP		ŀ
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SY-ZIP			6.4 CITY - ST - ZIP		

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.

954-382-0880