

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

FILED
Mar 10 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 # P 94000040166

1. Corporation Name

B & F Enterprises USA, INC

Principal Place of Business

Mailing Address

531 West
magnolia St

Samp

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Arcadia FL

28 City & State

24 Zip 34266

25 Country USA

29 Zip

30 Country

3. Date Incorporated or Qualified

3a. Date of Last Report

5-27-1994

4. FEI Number

65-0494120

Applied For

Not Applicable

5. Certificate of Status Desired

17

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

18

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

19

Yes

20

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Haitnam Yousef

81 Name

Haitnam Yousef

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

43 Winifred St

83

84 City

Arcadia

FL

85 Zip Code

34266

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

Haitnam Yousef

(NOTE: Registered Agent signature required when reinstating)

DATE

3-4-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
1.5 DELETE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY - ST - ZIP
1.9 DELETE
1.10 NAME
1.11 STREET ADDRESS
1.12 CITY - ST - ZIP
1.13 DELETE
1.14 NAME
1.15 STREET ADDRESS
1.16 CITY - ST - ZIP
1.17 DELETE
1.18 NAME
1.19 STREET ADDRESS
1.20 CITY - ST - ZIP

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

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

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

800002108428
-03/10/97--01081--022
***173.75

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. I am the 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.

SIGNATURE:

Fadwa Yousef

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-97

DATE

Daytime Phone

941 993 3312

CR2E034 (9/96)