

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 03, 1999 8:00 am
Secretary of State

03-03-1999 90110 018 ***150.00

DOCUMENT # P94000055426

1. Corporation Name

BAMBOO INVESTMENTS INC.



Principal Place of Business

4010 MILLER AVE

WEST PALM BCH. FL 33405
US

Mailing Address

4010 MILLER AVE

WEST PALM BEACH FL 33405
US

Change Address
Change Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/26/1994

4. FEI Number

65-0516466

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

21 506 MARLIN ROAD

Suite, Apt. #, etc.

22

City & State

23 NORTH Palm Beach, FL

Zip

24 33408

25 USA

2a. Mailing Address

26 506 MARLIN ROAD

Suite, Apt. #, etc.

27

City & State

28 NORTH Palm Beach, FL

Zip

29 33408

30 USA

9. Name and Address of Current Registered Agent

FARR, LATIMER C. III
4010 MILLER AVE
WEST PALM BEACH FL 33405

Change Address
only

10. Name and Address of New Registered Agent

81 Name

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

83 506 MARLIN ROAD

84

City

NORTH Palm Beach

FL

85 Zip Code

33408

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

12. OFFICERS AND DIRECTORS

TITLE P
NAME EAKIN, DEAN A
STREET ADDRESS 4010 MILLER AVE STE 1
CITY-ST-ZIP WEST PALM BEACH FL
Change Address only

TITLE VPT
NAME LATIMER, FARR C. III
STREET ADDRESS 4010 MILLER AVE STE 1
CITY-ST-ZIP WEST PALM BEACH FL
Change Address only

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 P
1.2 NAME DEAN A. EAKIN
1.3 STREET ADDRESS 224 GRAY STREET
1.4 CITY-ST-ZIP WEST PALM BEACH, FL 33405
Change Addition

2.1 TITLE V.P.T.
2.2 NAME LATIMER C. FARR III
2.3 STREET ADDRESS 506 MARLIN ROAD
2.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408
Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FARR, LATIMER C. FARR III, V.P.

2/16/99

561-848-1687

CR2E034 (1/98)