

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

DOCUMENT # P94000063477

1. Corporation Name
B & D RESOURCES, INC.

Principal Place of Business
4905 34TH ST-S 695 CENTRAL AVE
#5100 STE 107
ST PETERSBURG FL 33711
US 33701

Mailing Address
4905 34TH ST-S 695 CENTRAL AVE
#5100 STE 107
ST PETERSBURG FL 33711
US 33701

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90168 026 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/25/1994

4. FEI Number
59-3261176

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
21 695 Central Ave

2a. Mailing Address
26 695 CENTRAL AVE

Suite, Apt. #, etc.
22 Suite 107

Suite, Apt. #, etc.
27 Suite 107

City & State
23 St. Petersburg, FL

City & State
28 ST. Petersburg, FL

Zip Country
24 33701 25 USA

Zip Country
29 33701 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BRANT, SHERYL L~~
~~4905 34TH ST-S #5100~~
~~SUITE 328~~
~~ST PETERSBURG FL 33711~~

81 Name Frank Butler
82 Street Address (P.O. Box Number is Not Acceptable)
10550 US 19 North
83 Piellas Park, FL 33782
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0102 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)

4/29/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BRANT, SHERYL L James S. Ley
STREET ADDRESS 4905 34TH ST-S #5100
CITY-ST-ZIP ST PETERSBURG FL

1.1 TITLE PRESIDENT
1.2 NAME JAMES S LEY
1.3 STREET ADDRESS 695 CENTRAL AVE STE 107
1.4 CITY-ST-ZIP ST. PETERSBURG, FL 33701

TITLE D
NAME D'AMARIO, GREGORY J
STREET ADDRESS 4905 34TH ST-S #5100
CITY-ST-ZIP ST PETERSBURG FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99

(727) 821-1100

Date

Daytime Phone #

CR2E034 (11/98)