

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000065586 (7)**

1. Corporation Name

BAGWELL ENTERPRISES, INC.



Principal Place of Business

**7350 SW 45TH ST.
MIAMI FL 33155**

Mailing Address

**7350 SW 45TH ST.
MIAMI FL 33155**

3. Date Incorporated or Qualified
08/30/1994

3a. Date of Last Report
02/22/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number
65-0521575

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

Yes No

9. Name and Address of Current Registered Agent

**BAGWELL, WILLIAM H
7350 SW 45TH ST.
MIAMI FL 33155**

10. Name and Address of New Registered Agent

81 Name

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

83

84 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is registered as the Registered Agent

Signature of Agent(s) who is/are not being changed

DATE

12. OFFICERS AND DIRECTORS

DELETE

TITLE: **P**
NAME: **BAGWELL, WILLIAM H**
STREET ADDRESS: **7350 SW 45TH ST.**
CITY-ST-ZIP: **MIAMI FL**

DELETE

TITLE: **S**
NAME: **BAGWELL, CYNTHIA**
STREET ADDRESS: **7350 SW 45TH ST**
CITY-ST-ZIP: **MIAMI FL**

DELETE

TITLE: **VP**
NAME: **WHITE, WILLIAM F**
STREET ADDRESS: **7350 SW 45TH ST**
CITY-ST-ZIP: **MIAMI FL**

DELETE

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

DELETE

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

DELETE

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Cynthia Bagwell* **CYNTHIA BAGWELL**

DATE: **4/10/96** (305) 254-2884

CR2E034 (12/95)