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May 06, 1999 8:00 am
Secretary of State

05-06-1999 90064 020 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000075137

1. Corporation Name

B & G MANUFACTURING, INC.

Principal Place of Business

**5129 TRENTON
TAMPA FL 33619**

Mailing Address

**5129 TRENTON
TAMPA FL 33619**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/10/1994

4. FEI Number

59-3273120

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 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**FRISCO, BRUCE
7510 N OLA
TAMPA FL 33604**

10. Name and Address of New Registered Agent

81 Name
Christopher A. Frisco
82 Street Address (P.O. Box Number is Not Acceptable)
5129 Trenton Street

84 City
Tampa

85 Zip Code
FL 33619

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 **Christopher A. Frisco**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-99

12. OFFICERS AND DIRECTORS

TITLE PST ☒ DELETE
NAME FRISCO, BRUCE
STREET ADDRESS 7510 NORTH 01A
CITY-ST-ZIP TAMPA FL

TITLE D ☒ DELETE
NAME FRISCO, BRUCE
STREET ADDRESS 7510 NORTH 01A
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PST ☐ Change ☒ Addition
1.2 NAME Christopher A. Frisco
1.3 STREET ADDRESS 5129 Trenton Street
1.4 CITY-ST-ZIP Tampa, FL 33619

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Christopher A. Frisco
2.3 STREET ADDRESS 5129 Trenton Street
2.4 CITY-ST-ZIP Tampa, FL 33619

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

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

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

6.1 TITLE ☐ Change ☐ Addition
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: **Christopher A. Frisco**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99 813-247-2369

Date

Daytime Phone #

CR2E034 (11/98)