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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000093286 (0)

BULL MARKET INVESTMENT CORPORATION

Principal Place of Business Mailing Address

4000 BAL HARBOR BLVD.

#216

PUNTA GORDA FL 33950

Mailing Address

4000 BAL HARBOR BLVD.

#216

PUNTA GORDA FL 33950

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

						3. Date incorporated of Quantied	
						01/01/1995	
—	ace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				65-0541518 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution	
Zip	Country	Zip	Cau	ıntry		8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
BARUFALDI, JAMES R					Name		
4000 BAL HARBOR BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)			
#216				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
PUI	MA GUNDA PL 33930			-			
				84	,	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, typed or printed name of registered agent			d Ager	nt signature r	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	☐ DELETE	1.1 TI	1.1 TITLE		Change L Addition	
NAME	BARUFALDI, JAMES R		1.2 N	AME			
STREET ADDRESS 4000 BAL HARBOR BLVD., #216		16	1.3 \$1	1.3 STREET ADDRESS			
CITY - ST - ZIP	PUNTA GORDA FL 33950		1.4 CI	1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME			2.2 NAME				
STREET ADDRESS	235		235	RFFT.	ADDRESS		
CITY-ST-ZIP			2. 4 CITY - S				
TITLE	A A A A A A A A A A A A A A A A A A A	☐ DELETE	3.1 TITLE		1-28	Change Addition	
NAME				AME			
	■ 1		•		*000000		
STREET ADDRESS			3.3 STREET ADDRESS		1		
CITY - ST - ZIP				3.4. CITY - ST- ZIP		Change Addition	
TITLE	_ <u> </u>			4.1 TITLE		L. Grange L. Addrich	
NAME			4. 2 N		ļ		
STREET ADDRESS			4.3 ST	REET	ADDRESS		
CITY-ST-ZIP			4.4 CI	TY-ST	r-ZiP		
TITLE		☐ DELETE	5.1 Ti	TLE		Change Addition	
NAME			5.2 N/	AME			
STREET ADDRESS			5.3 S	REET	ADDRESS		
CITY-ST-ZIP			5,4 CI	TY-\$1	r- žip		
TITLE		☐ DELETE	6.1 71			Change Addition	
NAME		_	6.2 N/				
1				-	ADDRESS		
STREET ADDRESS							
CITY-ST-ZIP	artily that the information supplied with	this filing does not qualify to	6.4 Cl	ir-sī amet	ion stater	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated	on this annual report or supplied will	annual report is true and acc	urate an	d tha	at my sign	nature shall have the same legal effect as if made under oath; that I am an	

14. Thereby certify that the information supplied with this filing does not quality 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.

GIGNATURE Janua R. Barufel W. Prisident 1-19-98 (941) 629 6965

CHZE034 (10/97)