Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90164 005 ***150.00

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 # P9500000036

1. Corporation Name

CITY-ST-ZIP

THE B-TEAM INTERNATIONAL INCORPORATED

	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·						
Principal Plac	e of Business	Mailing Address	Mailing Address					
706 N.W. 164TI	706 N.W. 164TH AVE.							
FT. LAUDERDA	FT. LAUDERDALE FL 33028	UDERDALE FL 33028			DO NOT WRITE IN THIS	S SPACE		
		·				3. Date Incorporated or Qualifed		_
						01/01/1995		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	I A	oplied For
21		26				65-0546468	N.	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22		27				5. Certificate of Status Desired	Fee R	equired
City & Stat	e	City & State	•			6. Election Campaign Financing	\$5.00	May Be
23	·	28			_	Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year tr		_
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent		241		10. Name and Address of New Registered	Agent	
DC II	ELIC MAULIAM			81	Name			
	elis, William N.W. 164th ave.	•		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	,	
Fi.	LAUDERDALE FL 33028			83				}
			i	84	City		85 Zip	Code
			_					
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the al	bove Lhv t	-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	f changing its sintment as re	s régistered eaistered
agent. I a	im familiar with, and accept the oblig	ations of, Section 607.0505, Flo	rida Statı	ıtes.	no corporatio	sing board of another control by another are approximately	.,	
SIGNATURE	•							
	Signature, typed or printed name of registered ag			Agent	signature require	d when reinstating) DATE ADDITIONS (CHANGES TO OFFICE BS A	ND DIDECT	2DS IN 12
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	P		1.1 111					
NAME	BEJELIS, WILLIAM		1.2 NA					[
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL		_	1.4 CITY-ST-ZIP			☐ Change	Addition
TITLE	VTS	☐ DELETE	2.1 TITLE				☐ ¢ilalige	
NAME	BEJELIS, JOANNE		2.2 NAME					Ι,
STREET ADDRESS		Simple State Control	1		ADDRESS		*	
CITY-ST-ZIP	FORT LAUDERDALE FL	□ DELETE		ITY-ST	r-zip		☐ Change	Addition
TITLE		☐ DELETE	3.1 ∏				□ ouende	
NAME			3.2 NA					{
STREET ADDRESS					ADDRESS			}
CITY-ST-ZIP			_	TY-ST	r-ZIP		Chanca	- Addition
TITLE		☐ DELETE	4.1 ∏				☐ Change	☐ Addition
NAME			4. 2 N					
STREET ADDRESS			4.3 ST	REET.	ADDRESS			
CITY-ST-ZIP				TY-ST	-ZIP			CT Addition
TITLE		☐ DELETE	5.1 TO			•	Change	Addition
NAME			5.2 NA		LIMPERS			}
STREET ADDRESS					ADDRESS			}
CITY-ST-ZIP		<u> </u>	_	TY-ST	-ZIP			Addition
TITLE	}	☐ DELETE	6.1 TIT				Change	Addition (
NAME		•	6.2 NA					}
STREET ADDRESS			6.3 ST	REET.	ADDRESS)

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.

6.4 CITY-ST-ZIP

JEORNINE BEJEUS.