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 # 1. Corporation Name

P95000010593 (8)

BFBC COMPANY

FILED Mar 05 1998 8:00am Secretary of State



			·	I 19011901 INU 1919 I DINE DOME DEFIN 90111 DOME DOME	B
Principal Place of Business Mailing Address					
2575 CORTLAND DR UPPER ST. CLAIR PA 15241		251 COMMERCE BLVD SUITE 1420			
		ALTAMONTE SPRINGS FL 32714		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 02/08/1995	
9 Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	ace of Bosiness	26		58-2171268	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24	25		30	Personal Property Tax due June 30.	Yes 🗌 No
	g. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered	d Agent
BRITZMAN, JOEL			81 Name	RicHARD B. WOY	+11
251 COMMERCE BLVD			82 Street	Address (P.O. Box Number is Not Acceptable)	1
SUITE 1420			B3 COMMERCE BLUCK		
ALTAMONTE SPRINGS FL 32714			5017E 1420		
			84 City	9 ht Amonte Springs FI	85 Zip Code 32714
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 PRESIDENT 2-28-98					
Signature typed or printed name of impostured agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
TITLE	OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12
NAME	WORTH, RICHARD		1.0 NAME		Change Di yangan
STREET ADDRESS	120 WITHEROW		1.3 STREET ADDRESS		
CITY-SI-ZIP	SEWICKLEY PA 15143		1.4 CITY-ST-ZIP		{}
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	REILLY, MICHAEL		2.2 NAME		
STREET ADDRESS	104 BURR RIDGE		2.3 STREET ADDRESS		
CITY-ST-ZIP	BURR RIDGE IL 60521		2. 4 CITY - ST - ZIP		[
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	LAVALLIE, ARTHUR		3.2 NAME		
STREET ADDRESS	4728 WALLBANK AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DUNNERS GROVE IL 60515		3.4. CITY - ST-ZIP		
TITLE	D	☐ DELETE	41 TITLE		Change Addition
NAME	BURKHARD, J. THOMAS		4 2 NAME		
STREET ADDRESS	9116 FALL RIVER LANE		4.3 STREET ADDRESS		
CITY-ST-ZIP	POTOMIC MD 20854		4.4 CITY-ST-ZIP		
TITLE	D	☐ DEL et e	5.1 TITLE		Change Addition
NAME	STONE, BOHDAN		5.2 NAME	1122 A 2. +/ = A Dag Pond	
STREET ADDRESS	2575 COURTLAND DR		5.3 STREET ADDRESS	Mc DONALD, PA 150	
CITY-ST-ZIP	UPPER ST CLAIR PA 15241		5.4 CITY - ST - ZIP	Mc DONALD, PH 150	5 7
TITLE		☐ DELETE	6.1 TITLE	•	Change L Addition
NAMÉ			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP	and the state of several and state of several and state of several and several	the title filling class and qualify for	6.4 CITY-ST-ZIP	d in Section 110 07/3/i) Florida Statutes Lighter of	and the the left western

I nereoy certify that the information supplied with this filling 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.

GNATURE

SIGNATURE: