## 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 # P95000016396 (0)

B K B DEVELOPMENT, INC.

**FILED** Apr 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 I IODIFOOT FAR IDIOL DIDJE ODIRE ODI		AFAUR DHAU DU	11 <b>9 B</b> 2112 1 <b>5</b> 01
DEV. CORP. 950 N COLUE MARCO ISLAN US			950 NORTH COLLIER BLVD. MARCO ISLAND FL 33937			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						02/28/1995			
	pal Place of Business  2a. Mailing Address					4. FEI Number		<del> </del>	pplied For
21   26   Suite, Apt. #, etc.   Suite, Apt. #, etc.						98-0151826			ot Applicable Additional
27						5. Certificate of Status Desired			equired
City & State City & State			·			6. Election Campaign Financing		\$5.00	May Be
23	28				,	Trust Fund Contribution			to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has pa			
24	25 29 30 29 30 29 Name and Address of Current Registered Agent					Personal Property Tax due June 10. Name and Address of New Re			No No
					Name	10. Hallo dito Addition of How Ho	<b>3</b> .0.0.00	Bo	
TUCKER, E. GLENN SUN BANK CENTRE, SUITE 204					Chront Anisha	(D.O. Day Niyashar is Alah Assardash	.1-1		
950 NORTH COLLIER BLVD.					Street Addre	ess (P.O. Box Number is Not Acceptat	эн э		
MARCO ISLAND FL 34145				83					
			}	84	City	<del> </del>		<b>85</b> Zip	Code
					•		<u>FL</u>		
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 and title if applicable. (NOTE: Registered  12. OFFICERS AND DIRECTORS  13.					nt signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTO	RS IN 12
TITLE	······································		1,1 111	LE		ADDITIONO/OFFICIALIST TO OFFIC		Change	Addition
NAME	KOEBEL, BERND 12			ME					Į.
STREET ADDRESS				1.3 STREET ADDRESS					[ ]
CITY-ST-ZIP	MARCO ISLAND FL 1.4			TY - S1	T-ZIP				
TITLE			2.1 Til	LE.				Change	Addition
NAME				2.2 NAME		•			
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE			2. 4 Cl		1-21P			Change	Addition
NAME			3.1 10 3.2 NA				•	Onlange	FACOMON
STREET ADDRESS				3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CI						
TITLE			4.1 TIT					Change	Addition
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI	IY-\$1	T-ZIP				
TITLE	☐ DELETE 5.11		5.1 TIT	LE			l	Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		- Briere	5.4 CI		T-ZIP		· · · · ·	Channe	Addition
TITLE		☐ DELETÉ	6.1 111				L	Change	Addition
NAME			6.2 NA		4000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	adily that the information curreled a	with this tiling does not qualify for	6.4 Cl			Section 119 07/3Vi) Florida Statutes I	further cen	tify that the	o information

resease very trist the information supplied with this little certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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 ename attachment with an address.

SIGNATURE:

4/6/98