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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000027538 (4)

BUSINESS CONNECTION ENTERPRISE, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailino Address 7231 N.W. 79TH TERRACE 7231 N.W. 79TH TERRACE MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/03/1995 Applied For 65-0574437 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 1154 Personal Property Tax due June 30. ΓlNo . Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BOUCHER, PEDRO C 5209 N.W. 74TH AVE. 82 STE. 201-B 83 **MIAMI FL 33166** 84 City MI AMI Zip Code 330/8 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, to the State of Pricial State of Pricial Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, and accept the obligations of Section 217.0505, Florida Statutes. **SIGNATURE** (NOTE Registered Agent signature required when reinstating) (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. Change DELETE Addition 1.1 TO LE BOUCHER. **BOUCHER, PEDRO C** NAME 1.2 NAME **95**0 N.E. 171ST STREET SUITE 114 1.3 STHEET ADDRESS STREET ADDRESS **NORTH MIAMI BEACH FL 33162** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE **BOUCHER, IRASEMA S** NAME 2.2 NAME 950 N.E. 171ST STREET SUITE 114 STREET ADDRESS 23 STREFT ADDRESS **NORTH MIAMI BEACH FL 33162** CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP

14. Thereby 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 il changed, or an an atta