## 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 # P95000034225

BBC INVESTMENT GROUP, INC.

Principal Place of Business Mailing Address							
253 ISLE WAY PALM BEACH GARDENS FL 33418  253 ISLE WAY PALM BEACH GARDENS FL							
			L 33418		DO NOT WRITE IN THIS SPACE		
ı					3. Date Incorporated or Qualifed		
i					05/02/1995		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apı	plied For
21 26					65-0578026	No	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
22					5. Certificate of Status Desireo	Fee Re	quired
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00	· .
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year		
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent		AT	10. Name and Address of New Registere	a Agent	
	IED WALLAND ID		8.	1 Name			
SAUER, WILLIAM P JR. 253 ISLE WAY			83	Street Add	ress (P.O. Box Number is Not Acceptable)		
			_				
PALM BEACH GARDENS FL 33418				3			
				4 City		. 85 Zip C	ode
				'	F	- 1 1	
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was a	utnorized b	v tne corborati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as reg	gistered
SIGNATURE				<del></del>	ad when reinstating) DATE		
organia organia				Registered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	D OFFICERS AF	DELETE	1.1 TITLE		ADDITIONAL CHARGES TO GITTOERG	Change	Addition
TITLE	SAUER, WILLIAM P JR.	(	1.2 NAME				
NAME	ATA IOLE WILL			ET ADDRESS			
DALLA DEACH CARDENO EL COATO				į			
CITY-ST-ZIP	PALMI BEACH GARDENS FL 3	· DELETE	1.4 CITY- 2.1 TITLE			[] Change	☐ Addition
TITLE	1	OCCC1C	2.2 NAME				
NAME	1		i -	ET ADDRESS			
STREET ADDRESS			1	1			
CITY-ST-ZIP		DELETE	2. 4 CITY 3.1 TITLE			Change	Addition
TITLE		_ 52261E	3.2 NAME	ĺ		- •	
NAME	İ			1			
STREET ADDRESS	5) 		8	ET ADDRESS			
CITY-ST-ZIP	<b> </b>	☐ DELETE	3.4. CITY 4.1 TITLE			Change	Addition
TITLE	1	☐ here∤e	4.1 RILE				
NAME			■ 4 2 NAM				
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP		□ DELETE		ET ADDRESS ST-ZIP		Change	Addition

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 the 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 or an appear with an address, with all other like empowered.

5.2 NAME

61 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

**SIGNATURE:** 

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

Change

☐ Addition

**FILED** 

May 07, 1999 8:00 am Secretary of State

05-07-1999 90014 049 \*\*\*150.00

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