

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000034705 (0)

1. Corporation Name
BERNARD MANAGEMENT GROUP, INC.



Principal Place of Business: **3715 14TH STREET WEST BRADENTON FL 34205**
Mailing Address: **3715 14TH STREET WEST BRADENTON FL 34205**

3. Date Incorporated or Qualified: **04/28/1995** 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country 30 Country

4. FEI Number: **65-0594277** Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEIN, ALAN
3715 14TH STREET WEST
BRADENTON FL 34205**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE _____
Signature typed or printed name of registered agent and that of applicant. (Date) Registered Agent's signature required when changing.

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PSD	<input type="checkbox"/> DELETE
NAME	BERNARD, MILTON	
STREET ADDRESS	3715 14TH STREET WEST	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1 2 NAME			
1 3 STREET ADDRESS			
1 4 CITY-ST-ZIP			
2 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2 2 NAME			
2 3 STREET ADDRESS			
2 4 CITY-ST-ZIP			
3 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3 2 NAME			
3 3 STREET ADDRESS			
3 4 CITY-ST-ZIP			
4 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4 2 NAME			
4 3 STREET ADDRESS			
4 4 CITY-ST-ZIP			
5 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5 2 NAME			
5 3 STREET ADDRESS			
5 4 CITY-ST-ZIP			
6 1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6 2 NAME			
6 3 STREET ADDRESS			
6 4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Milton Bernard*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/96
DATE EXPIRES PLEASE #

CR2E034 (12/95)