

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
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DOCUMENT # P95000045185
1. Corporation Name

BUJEME INC.

FILED

98 JUL 30 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
8134 - 122nd St. N. Seminole, FL 33772-4441	8134 - 122nd St. N. Seminole, FL 33772-4441

DO NOT WRITE IN THIS SPACE

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
25	30

3. Date Incorporated or Qualified
06/06/1995

4. FEI Number
59-3325821

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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DEVRIES, WALLACE B
8134 - 122ND ST N
SEMINOLE, FL 33772-4441

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code

11. Pursuant to the provisions of Sections 607.0607 and 607.1908, 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, Florida Statutes.

SIGNATURE

Signature of Secretary, Treasurer, or Officer (check one)

(if not Registered Agent signature, retained with reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	President/Secretary
STREET ADDRESS	DEVRIES, WALLACE B.
CITY, ST, ZIP	8134 - 122ND ST N
TITLE	☐ DELETE
NAME	SEMINOLE, FL 33772-4441
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	V-P/Treasurer
STREET ADDRESS	8134 - 122ND ST N
CITY, ST, ZIP	DEVRIES, DONNA
TITLE	☐ DELETE
NAME	SEMINOLE, FL 33772-4441
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	100002608461--5
1.3 STREET ADDRESS	-08/05/98--01107--001
1.4 CITY, ST, ZIP	***150.00 ***150.00
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

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 correspondence 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 as an attachment with an address.

SIGNATURE:

Wallace B. Devries
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/98 (813)397-8555
Date Daytime Phone

CR2E034 (10/97)