## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

29

9. Name and Address of Current Registered Agent

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000050515 (2)

B AND D CLEARING ACCOUNT, INC.

Principal Place of Business Mailing Address 12040 S.W. 28 COURT 12040 S.W. 26 COURT DAVIE FL 33330-1328 DAVIE FL 33330 3a. Date of Last Report 3. Date incorporated or Qualified 06/26/1995 04/10/1996 2. Principal Place of Business 2a. Mailing Address FEI Number 65-0594831 21 26 Suite, Apt #, etc. Suite, Apt. #. etc \$8.75 Additional K) 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution П 23 28 Žφ Zφ Country Country B. This corporation has liability for intangible tax under s. 199.032,

30

DOWNS, JACK C 12040 S.W. 26 COURT **DAVIE FL 33330** 

24

	Florida Statutes 🔀 Yes 🛄 No
T	10. Name and Address of New Registered Agent
81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
100	
63	

**FILED** 

Mar 10 1997 8:00am

Secretary of State

Applied For

Fee Required

Added to Fees

Not Applicable

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, typoid or pricted name of negistered agent and title Lapplicable (NOTE:	Registered Agent signature	required when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P DELETE	1.1 TITLE	Change Addition
NAME	DOWNS, JACK C	1.2 NAME	
STREET ADDRESS.	12040 S.W. 26 COURT	1.3 STREET ADDRESS	
City - S1 7IP	DAVIE FL 33330	1.4 CITY - ST-ZIP	
THILE	<b>VP</b> □ DELETE	2.1 TITLE	Change Addition
	MI ALIATEINI NICAL		

BLAUSTEIN, NEAL 12040 S.W. 26 COURT STREET ADDRESS 2.3 STREET ADDRESS **DAVIE FL 33330** 2.4 CITY-ST-ZIP CHY-ST-ZIP DELETE 3.1 TITLE ☐ Change \_\_\_ Addition TITLE DOWNS, JUDY L 3.2 NAME NAME 12040 S.W. 26 COURT STREET ADDRESS 3.3 STREET ADDRESS **DAVIE FL 33330** 3 4. CITY - ST - 24P CITY-ST-ZIE DELETE Change Addition 4.1 TITLE TifLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 4.4 CITY - ST - ZIP DELETE Change Addition THLE 5.1 TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADDRESS

6.4 CHTY-ST-ZIP CITY-ST-20-14. I do 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 arinual report or supplemental 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 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 charged, or on an attachment with an address.

54 CHTY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

SIGNATURE:

DITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

DELETE

Change

■ Addition