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

PROFIT CORPORATION 'ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000075887 (6)

B.L. ARK GROUP, INC.

STREET ADDRESS

Principal Place of Business Mailing Address % FRED CHIKOVSKY W FRED CHIKOVSKY 1720 HARRISON STREET. 7TH FLOOR HOLLYWOOD FL 33020 1720 HARRISON STREET, 7TH FLOOR HOLLYWOOD FL 33020-6829 3a. Date of Last Report 3. Date Incorporated or Qualified 10/02/1995 05/01/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0614527 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country  $Z_{\rm ID}$ This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CHIKOVSKY, FRED ESQ 1720 HARRISON ST 82 Street Address (P.O. Box Number is Not Acceptable) 7TH FLOOR 83 **HOLLYWOOD FL 33020** 84 City 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and bile if appropable (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DEFFIE Change Addition 11100 TITLE DIAMOND, CAROLE 12 NAME **CR2E034** NAME 1720 HARRISON ST. 7TH FLOOR STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 1.4 CHY-ST-7IP CITY-ST-ZIP Change Addition DELETE 2.1 UTLE 22 NAMI NAME 23 SUBELL ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CHY+S1+ZIP DELETE Change Addition 3.1 Till E TITLE 3.2 NAME NAME 3.3 STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition TITLE DELETE 4.1 TILLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-7IP Addition DELETE TITLE 5.1 ID: F 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST- ZIP DELETE Change Addition 61 111118 TITLE 6.2 NAME NAME

63 STREET ADDRESS

64.01Y-ST-ZIP

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 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 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.