

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 # P95000096580 (2)

1. Corporation Name

BOUVINE INDUSTRIES, INC.



Principal Place of Business

469 ST.L FRANCIS STREET
TALLAHASSEE FL 32301

Mailing Address

469 ST.L FRANCIS STREET
TALLAHASSEE FL 32301

2. Principal Place of Business

2a. Mailing Address

21 The Cow Havs

26 469 St. Francis St.

3. Date Incorporated or Qualified

12/21/1995

3a. Date of Last Report

4. FEI Number

59-3358609

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

22 City & State

23 Tallahassee, FL

24 Zip 32301

Country

25 USA

27 City & State

28 Tallahassee, FL

29 Zip 32301

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PITTS, BRENT H
469 ST.L FRANCIS STREET
TALLAHASSEE FL 32301

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

(Signature, typed or printed name of registered agent and street address)

(Name of Registered Agent signature required when name change)

DATE

12. OFFICERS AND DIRECTORS

DELETE

TITLE D
NAME BREWER, BRETT R
STREET ADDRESS 608-A WEST CALL STREET
CITY-ST-ZIP TALLAHASSEE FL 32304

DELETE

TITLE D
NAME GIBLET, BRIAN D
STREET ADDRESS 2230 AMELIA CIRCLE
CITY-ST-ZIP TALLAHASSEE FL 32304

DELETE

TITLE D
NAME PITTS, BRENT H
STREET ADDRESS 3421-B JIM LEE ROAD
CITY-ST-ZIP TALLAHASSEE FL 32301

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

Change Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

Change Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

Change Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

Change Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

Change Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 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:

Brett R. Brewer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-20-96 (904) 681-6692
Date Daytime Phone

CR2E034 (12/95)