SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT-DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PORT ST. LUCIE FL 34985

Suite, Apt. #, etc.

2a. Mailing Address

P.O. BOX 8611

PROFIT
CORPORATION
ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

PORT ST. LUÇIE FL 34985

Suite, Apt. #, etc.

P.O. BOX 8611



FLORIDA DEPARTMENT OF STATE

FILED

Jul 31 1998 8:00am

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5. Certificate of Status Desired

01/01/1996

65-0623888

4. FEI Number

7/24/08

Secretary of State

Applied For

\$8.75 Additional

Not Applicable

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600000603 (6)

1. Corporation Name

B & H INVESTMENTS GROUP INC.

| 22 | | 27 | 27 | | | | 5. Certificate or Status Desired Fee Required | |
|---|--|-----------------|---------------|-----------------|---|---------------------------------------|--|--|
| City & State | 9 | City | City & State | | | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | | 28 | · | | | | Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip | | Country | / | | 8. This corporation owes or has paid the current year Intangible | |
| 24 | 25 | 29 | 3 | 0 | | | Personal Property Tax due June 30. Yes No | |
| | 9. Name and Address of Cu | rent Registered | Agent | | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 85 Support the purpose of changing its registered and by the corporation's board of directors. I hereby accept the appointment as registered | | | |
| | htm a n, arthur | | | 81 | * | Name | | |
| 4325 SW COUNTRY PLACE PALM CITY FL 34990 | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | | ↓ | | | |
| | | | | 83 | | | | |
| | | | | 84 | + | City | B5 Zip Code | |
| | | | | | L | | | |
| 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 | | | | gen | l signature requi | ired when reinstating) DATE | |
| 12. | | AND DIRECTOR | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | PT DELETE | | L DELETE | 1.1 TITLE | | ł | Change Additio | |
| NAME | HECHTMAN, ARTHUR | | | 1.2 NAME | | l | | |
| STREET ADDRESS | 4325 SW COUNTRY PL | | | 1.3 STREET | | | | |
| CITY-ST-ZIP | PALM CITY FL 34990 | | | 1.4 CITY-ST-ZIP | | · | | |
| TITLE | V\$ | | DELETE | 2.1 TITLE | | | Change Addition | |
| NAME | LYNN-BRAGA, DIANA | | | 2.2 NAME | | İ | | |
| STREET ADDRESS | 1734 DUMA TERRACE | | | 2.3 STREET | | · · · · · · · · · · · · · · · · · · · | | |
| CITY-ST-Z#P | PORT ST LUCIE FL | | | 2.4 CITY-ST | T-ZIF | <u> </u> | | |
| TITLE | L_ DELETE | | ☐ DELETE | 3.1 TITLE | | | Change Addition | |
| NAME | | | | 3.2 NAME | | | | |
| STREET ADDRESS | | | | 3.3 STREET | ADI | DRESS | | |
| CITY-ST-ZIP | | | · | 3.4 CITY-ST | T-ZIF | · | | |
| TITLE | | | ☐ DELETE | 4.1 TITLE | | | | |
| NAME | | | | 4.2 NAME | | | 4106 | |
| STREET ADDRESS | | | | 4.3 STREET | I ADI | DRESS | //\/\C1 | |
| CITY-ST-ZIP | | | | 4.4 CITY-ST | T-ZIP | · | 4/13/ | |
| TITLE | | | L_ DELETE | 5.1 TITLE | | | 700026058€ Fin¶ | |
| NAME | | | | 5.2 NAME | | | -08/ 03/98011 1 10 0 2 | |
| STREET ADDRESS | | | | 5.3 STREET | [ADI | DRESS) | ***150.00 | |
| CITY-ST-ZIP | | | | 5.4 CITY-ST | T-ŻIF | · | | |
| TITLE | | | DELETE | 6.1 TITLE | | İ | Change Addition | |
| NAME | | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | | 6.3 STREET | ADE | DRESS | | |
| CITY-ST-ZIP | | | | 6.4 CITY-ST | | | | |
| 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 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 por 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 chapted or por in attachment with an address. | | | | | | | | |

B&H INVESTMENTS GROUP INC

P.O.Box 8611 ~ Port St. Lucie, Fl. 34985 Phone 1-561-337-1513 ~ Fax 1-561-335-3422 ~ Email BHIGS@Aol.com

July 24, 1998

Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: B & H Investments Group, Inc.

65-0623888

1998 Annual Report

Dear Sirs:

Enclosed please find a check in the amount of \$150.00 in payment of the Annual Report Filing Fee for 1998.

I did not receive the first notice for payment and when I contacted your office upon receiving the second notice I was advised to remit \$150.00 along with this letter of explanation.

Thank you for your time and consideration.

Very Truly Yours.

Arthur Hechtman