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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600007945

Principal Place of Business	Mailing Address
1322 E COMMERCIAL BLVD FT LAUDERDALE FL	1322 E COMMERCIAL BLVD FT LAUDERDALE FL

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90002 030 ***150.00

BRITISH	DEPOT CORPORATION							
Principal Place	e of Business	Mailing Address				((82(128)) 110 13110 81111 88111 88111 88111	9111 88111 16818 181	4(80) 411: 1481
1322 E COMMERCIAL BLVD T LAUDERDALE FL 1322 E COMMERCIAL BLVD FT LAUDERDALE FL		Ō			DO NOT WRITE IN T	HIS SPACE		
						3. Date Incorporated or Qualifed		ļ
						01/25/1996		
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0634797		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & Stat	e	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zìp	Cou	ntry		8. This corporation owes the current year		<u>.</u>
24	25	29	30			Personal Property Tax.	☐Yes	No
	9. Name and Address of Curren	t Registered Agent		04	Al-	10. Name and Address of New Registe	rea Agent	
CDA	HAM MAHDICE			81	Name		•	ĺ
	HAM, MAURICE E PROSPECT RD			82	Street A	Address (P.O. Box Number is Not Acceptable)		
							-	
UAK	LAND PARK FL 33334			83				
				84	City		FL 85 Zig	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 agen	t and title if applicable. (NOT)	E: Registered	Agen	t signature rec	quired when reinstating) DATI	E	
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
TITLE	P	DELETE	1.1 गा	ιE			Change	Addition
NAME	SHADBOLT, DEREK A		1.2 NA	ME				
STREET ADDRESS	2734 SE 14TH ST		1.3 ST	REET	ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33062		1.4 CD	TY-SI	T-ZIP			
TITLE	PRESIDENT	☐ DELETE	2.1 TIT	ΠE			☐ Chang	e Addition
NAME	DERYL SHADBOLT		2.2 NA	ME		,		
STREET ADDRESS	2734 BE 14TH STREE	£7 -	2.3 ST	REET	ADDRESS			į
CITY-ST-ZIP	POMPANO BEACH, FI	2 33062	2.4 C	TY-S	T-ZIP		4,0	
TITLE	SECRETARY	☐ DELETE	3.1 TIT	LΕ	ļ	•	☐ Change	Addition
NAME	DEREK SHADBOLT 2734 SE (4TH STA	ラ <i>ニ</i> エイ	3.2 NA	WE	1			Į
STREET ADDRESS	2734 SE 1474 ST	CC = 1	3.3 ST	REET	ADDRESS			[
CITY-ST-ZIP	POMPANO BEACH FL	2 3 306 2	3,4. CI	_	T- ZIP		FT 05	
TITLE		☐ DELETE	4.1 TIT	ΙLΕ			Change	e 🔲 Addition
NAME	i		4. 2 N/	AME				
STREET ADDRESS	1		4 3 ST	REET	ADDRESS			
CITY-ST-ZIP	~		4.4 CF		T-ZIP		[] (hr	
TMLE		☐ DELETE	5,1 717			•	☐ Chang	e
NAME			5.2 NA					
STREET ADDRESS					r address			}
CITY-ST-ZIP				T-ZIP				
TITLE		☐ DELETE	6.1 TI				☐ Chang	e 🔲 Addition
NAME			6.2 NA					(
STREET ADDRESS			6.3 ST	REET	ADORESS			ĺ

6.4 CITY-ST-ZIP 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 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 occupred 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 anticompent with an antidess, with all other like empowered.

SIGNATURE:

DEREIL SHADBOUT