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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P96000008482 (7)

BJG MANAGEMENT, CORP.

Principal Place of Business

Mailing Address

FILED Mar 26 1998 8:00am Secretary of State

|--|--|

3500 MYSTIC SUITE 400-270 MIAMI FL 3311					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
					01/26/1996			
	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21 994	N-BARFIELD DR-	26 994 N.BA	RETE	W DR	- 65-0640185	No	ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc. 27 SUTE - 2			5. Certificate of Status Desired	\$8.75 / Fee Re	Additional equired	
City & State 23 AVAR	Country FL	City & State 28 MARCO ISL	AN	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	May Be to Fees	
Zip34(1	45 Country 25 US 1	Zip	Count	/SA	This corporation owes or has paid the current Personal Property Tax due June 30.	— ' —	langible No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered /	Agent		
LAWRENCE J. SHAPIRO & ASSOC., P.A.			8	81 Name				
80 S.W. EIGHTH STREET SUITE 2180			8	82 Street Address (P.O. Box Number is Not Acceptable)				
	MI FL 33130		8	3				
			8	1 - 7	FL		Code	
11. Pursuant to office or reagent. La	to the provisions of Sections 607.0502 agistored agent, or both, in the State of m familiar with, and accept the obligat	and 607.1508, Florida Statute of Florida, Such change was au lions of, Section 607.0505, Flor	s, the abouthorized bridges of the statute of the s	ve-named by the corp es.	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appropriate the control of the cont	changing it ointment as	is registered registered	
SIGNATURE	Signature, typed or printed name of registered agon	and life dappleable (NOTE:	Registered A	gent signature	required when reinstating) DATE		₋	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	₹S IN 12	
TITLE	PSTD	DELETE	1.1 TITLE		PRESIDENI	Change	Addition	
NAME	GALLO, BARRY J		1.2 NAME	:	GALLO BAPPY JULIAN			
STREET ADDRESS	3500 MYSTIC POINT DRIVE, SI	UITE 400-2708	1.3 STRE	ET ADDRESS	994 N. BARFIELD DR - JU	115 -7	[
CITY-ST-ZIP	MIAMI FL 33180		1.4 CITY	· ST- ZIP	GALLO BATRY JULIAN 994 N. BARFIFUS DR - 500 MARCU ISCAM) FC 3	4145.	·	
TITLE	-	DELETE	2.1 TITLE			☐ Change	Addition C	
NAME			2.2 NAME	:				
STREET ADDRESS			2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	10.4		2 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3 1 TITLE			☐ Change	☐ Addition	
NAME			3.2 NAME	:				
STREET ADDRESS			3 3 STREE	ET ADDRESS				
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			J	
TITLE		☐ DELETE	4.1 TITLE	Ĭ		Change	☐ Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STREE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETÉ	5.1 TITLE	i		Change	Addition	
NAME			5.2 NAME	: 				
STREET ADDRESS			5.3 STREE	et address				
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE		DELETE	6.1 TITLE	Ţ		☐ Change	☐ Addition	
NAME			6.2 NAME	.				
STREET ADDRESS			6.3 STREE	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY-	ST-ZIP				
14 I hereby c	artify that the information complete with	h this filing does not avalify for	the ever		d in Section 110 07/2\/i) Elevida Statutas I further co-	etific that tha	information	

I nereby 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 angual egyptical supplication of the conformation of the con

SIGNATURE:

PRESOUNT

MARCH 21, (998 94/384 4302