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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham^b

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600009024 (6)

B & K ENTERPRISES GROUP, INC.

Principal Place of Business Mailing Address FILED

JUL -8 AM 8: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9411 8.W. 41 APT. 105 MIAMI FL	TH STREET	9411 S.W. 4TH STREET APT. 105 MIAMI FL 33174-2019										
								Date Incorporated or 6 01/29/1996	Qualified	3a. Date	of Last F	leport
2. Principal Place of Business 21			2a. Mailing Address 26				4.	FEI Number 65-06392	26		<u> </u>	oplied For ot Applicable
Suite, Apr 22	1. ₩, e1c.	Suite, Apt. #, otc. 27				Certificate of Status D	esired		\$8.75	Additional equired		
City & Sta		28				6.	6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution Added to Fees					
Zip 24	25	Country	Zip 29		Count 30	ry	8.	This corporation has li Florida Statutes		ntangible tax		. 199.032,
	· · · · · · · · · · · · · · · · · · · 	Address of Current	Registered A	gent			·—·—	Name and Address of	of New Re	gistered Age	ent	
	RDONNE, BLAS				8	1 Name	;					
AP	11 S.W. 4TH STF 7. 105	EET			Ĺ		Address (P	O. Box Number is Not	Acceptab	le)		-
Mu	ami fil 83174				8	3						
					8					PLI	'	Code
agent.	registered agent, o am familiar with, an	of Sections 607 0502 or both, in the State of diaccopt the obliga	ol Florida, Such	n change was:	authorized I	by the car	d corporation rporation's b	n submits this statemer oard of directors. I her	nt for the p eby accer	urpose of ch It the appoin	anging it tment as	is registered registered
SIGNATURE	Signature, typed or print	od name of registered agen	t and title if applicab	le (NO	IL: Registered A	gent signatur	e required when	reinstation)		DATE		
12.		OFFICERS AND			13.			DDITIONS/CHANGES	TO OFFIC		RECTOR	RS IN 12
TITLE	D			DELETE	1.1 TITLE						Change	Addition
NAME	CARDONNE,				1.2 NAM			0000 *	022	<u> </u>	20	2
STREET ADDRESS		H ST. APT. 105			1.3 S1RE	L1 ADDRESS		<u>-</u> -[177117	97Ull	10	024
CITY-ST-ZIP	MIAMI FL 331	74			1.4 CITY	S1-ZIP		*	****16	5.UU M	EWWW.]	65.00
TITLE	D	LATTVA I		DELETE	2.1 101.0						Change	Addition
NAME	HERNANDEZ,				2.2 NAMI							
STREET ADDRESS	MIAM! FL 331	H ST. APT. 105			2.3 STRE	ET ADDRESS						
CITY-ST-ZIP TITLE	MINNIE	/ 1		DELETE	2. 4 City 3.1 Thu						Change	Addition
NAME				L_ DELCTE	3 2 NAMI					L)	Change	∧udition
STREET ADDRESS						F1 ADDRESS						
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NAME					4. 2 NAM	E					-	-
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CITY-S - ZIP					4.4 CITY	ST-ZIF						
TITLE				DELFTE	5.1 TITLE						Change	☐ Addition
NAME					5.2 NAME							,
STREET ADDRESS					5.3 STRE	1 ADDRESS						
CITY-ST-ZIP			·-	00,000	5.4 CITY		 			• N		A
TITLE				DELETE	6.1 TITLE					$M \vdash$	Change	Addition
NAME					6.2 NAME				,	くなりへ	0^{\prime}	′
STREET ADDRESS						1 ADDRESS				$\Sigma \setminus V$,-	
CITY-ST-ZIP	<u> </u>			_	6.4 CITY-	ST - ZIP	1			·		

14. 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. Ffurther certify that the information indicated on this angual report or Supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the properties of 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 Blood 13 in chapter 10 in an attachment with an address.