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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Scoretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000014751 (7)

B & M CONTRACTOR SERVICES, INC.

Principal Place 2797 S.W. 48T FT, LAUDERDA	H COURT	Mailing Address 2797 S.W. 46TH COURT FT. LAUDERDALE FL 33312-	5637		
				3. Date Incorporated or Qualified 02/12/1996	3a. Date of Last Report
21	age of Busingse 15W 96 CF	28. Mailing Address 26 2 7975W	4601	4. FEI Number 65 0639353	Applied For Not Applicable
, Sulte, Apt.	#, OLC.	Suile. Ant. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28 Hard	Mars	6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Tard	Country	Trust Fund Contribution  8. This corporation has liability for in	Added to Fees
24 33			OBIOUACE		Yes 🔼 No
DET	9. Name and Address of Current	<del></del>	81 Name D	10. Name and Address of New Reg	Istered Agent
279 FT_	LAUDERDALE FL-83312	et e	62 Street Add 63 84 City	Blact WALT.  Gress (P.O. Box Number is Not Acceptable  Gress (P.O. Box Number is Not Acceptable  Cand Dles	FL 85 Zin Codo 2ペシノフ
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, 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 Statules.					
SIGNATURE	Ignalure, typed or printed name of registered agent	Land title if applicable (NOTE)	Registered Agent signature requ	ired when scineta not	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	····
TITLE	0	DELETE	1.1 TOLE	THE STATE OF THE S	☐ Change ☐ Netfition
NAME	ETHAN MAHA A		1.2 NAME	STATE .	
STREET ADDRESS	AT JALLE TO SEE TO STATE	,	1.3 STREET ADDRESS	I to the second of the second	
CITY-ST-ZIP	D Pres.	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	WALTS, ROBERT W JR	□ Meetit	2.2 NAME		[7] outpide [7] Vocation
STREET ADDRESS	2797 SW 46TH CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		2.4 CITY-ST-ZIP	i,	
TITLE	Sec.	DELETE	3.1 7111.6		Change Addition
NAME	DEBORA WALLS		3.2 NAME		
STREET ADDRESS	PEBORA WALTS 27975W46 CT 29 Card, 219		3.3 STREET ADDRESS		'
CITY-ST-ZIP	og cara joir	DELETE	3.4 CHY-S1-7IP		Change   Addition
NAME		["] ptreit	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		4
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		, <u>,</u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST-ZIP		
TITLE		☐ DELETE	G.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

I do hereby certify that the information supplied with this filling 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and they note that appears in Block 12 or Block 13 if changed, or on an attachment with an address.

an attachment with an address.