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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000020144 (7) B.B'S G.G., INC.

Principal Place of Business

Mailing Address

## **FILED** May 02 1997 8:00am Secretary of State



12702 N. BOULEVARD TAMPA FL 33612		12702 N. BOULEVARD TAMPA FL 33612-4156					
			:		3. Date Incorporated or Qualified 3a. Date of Last Report 03/04/1996		t Report
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	<del></del>	Applied For
21		26	26		59-3373670		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		SR 75 Additional		
22		27	27		5. Certificate of Status Desired	5. Certificate of Status Desired Fee Regulred	
City & Stat	le	City & State			6. Election Campaign Financing		<u>`</u>
23		28	26		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip			This corporation has liability for intangible tax under s. 199.032,		
24			30		Florida Statutes		
9. Name and Address of Current Registered Agent			1,	10, Name and Address of New Registered Agent			
WOO	OD, BRADLEY J ESQ.		8	Name		-	
BOYDSTUN, DABROSKI & LYLE, P.A.							
		8:	Street Add	iress (P.O. Box Number is Not Acceptabl	e)		
	) NINTH STREET, N. PETERSBURG FL 33704		8	3		<del></del>	
01. 1	EIEHODONG IE 00704		L				
			8-	City		FL 85 Z	p Code
11 Pirreilant	to the provisions of Sections 607	0502 and 607 1509 Florido Statut	on the else	10 110 00 0 0 0 0 0 0	socialism subscite this state and find	╌┖┖┆┈	
office or r	registered agent, or both, in the	State of Florida Such change was	ies, the abb authorized t	yy the corpora	poration submits this statement for the pution's board of directors. I hereby accept	urpose of changing t the appointment	g its registered as registered
agent. I a	am familiar with, and accept the c	obligations of, Section 607.0505, Fi	orida Statute	es.	,		
SIGNATURE		·					
12.				gent signature requ	rired when reinstating)	DATE	
TITLE	D				ADDITIONS/CHANGES TO OFFICE		
NAME	-		1.1 TALE			☐ Chang	e 🔲 Addition
1	BLAIR, BRIAN L 12702 N. BOULEVARD		1.2 NAME	Į.			
STREET ADORESS	TANDA EL AGAZA			1 ADDRESS			
CITY-ST-ZIP			1.4 CITY-	S1-ZIP			
TITLE			2.1 TITLE			L Chang	e [_] Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREI				
CITY-ST-ZIP			2 4 CITY - ST - ZIP				
TITLE	DELETE		3 1 TITLE			☐ Chang	e 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS			3 3 STREE	T ADDRESS			ļ
CITY-ST-ZIP			3.4 CITY	ST-ZIP			
TITLE	☐ DELETE		4.1 TITLE			Chang	e Addition
NAME			4. 2 NAMS	:			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY -	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Changi	Addition
NAME			5.2 NAMÉ			<b>_</b>	_
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY-				
TITLE		DELETE	6.1 TITLE	01-411		Change	Addition
NAME			G.2 NAME				, P vooiiiou
STREET ADDRESS				I ADDOCOD			1
				TADDRESS			1
CITY-ST-ZIP			64 CITY-	ST - ZIP			1

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 that my name appears in Block 12 or Block 13 if changed, over an attachment with an address.