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

FILED May 17, 1999 8:00 am Secretary of State 05-17-1999 90061 012 ***150.00

DOCUMENT # P9600024663 (2)				03-17-1999 90001 012 ***130.00		
BSP, Inc.						
Principal Place of Business Mailing Address						
<u> </u>					E IN THIS SPACE	
				3. Date Incorporated or Qualifed		
Principal Place of Busin	ess	2a. Mailing Address		4. FEI Number	i Ar	phea For
21 1401 Brickel			: Kell Avenue	65-0656271		t Applicable
Suite. Apt. #, etc.	1 11101111	Suite, Apt. #, etc.	CICU PIVOLEC		- \$8.75	Additional
22 Sude 520		27 Juite 5		Certificate of Status Desired	Fee Re	equired -
City & State	_	City & State	<u>-</u> .	6. Election Campaign Financing		May Be
	<u>FC</u>	28 Miani	'	Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	8. This corporation owes the current	nt year Intangible Yes	□No
	25 USA and Address of Curre	nt Registered Agent	30 b s A	Personal Property Tax. 10. Name and Address of New Re		
		<u>g</u>	81 Name			
			82 Street Ad			
			Street Ad	dress (P.O. Box Number is Not Acceptab	ie)	
			83			
				te 520	las l Zin /	Zodo.
			84 City	i mi		Code 131
					urpose of changing its	registered
11. Pursuant to the provision	ons of Sections 607.050	02 and 607.1508, Florida Sta	stutes, the above-named co	rporation submits this statement for the pi	arbone el autorian a ma	
office or registered age	ent, or both, in the State	of Florida. Such change wa	atutes, the above-named co is authorized by the corpora	orporation submits this statement for the praction's board of directors. I hereby accept	the appointment as re-	gistered
office or registered age agent. I am familiar wit	ent, or both, in the State	02 and 607.1508, Florida Sta of Florida, Such change wa ations of, Section 607.0505,	atutes, the above-named co is authorized by the corpora Florida Statutes.	ation's board of directors, † hereby accept	the appointment as re-	gistered
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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 ar 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, or on an attachment with an address, with all other like empowered. David Marquette

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4 30199

(305) 371-9299 Daytime Phone #