


FILED


May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

May 02 1997 8:00am
Secretary of State



DOCUMENT # P96000026850 (3)

1. Corporation Name
BB, PANAMA CITY INVESTORS, INC.

Principal Place of Business
9020 EASTERLING DRIVE
ORLANDO FL 32819

Mailing Address
9020 EASTERLING DRIVE
ORLANDO FL 32819-4817

3. Date Incorporated or Qualified
03/25/1996

3a. Date of Last Report

2. Principal Place of Business
21 7680 REPUBLIC DRIVE
Suite, Apt. #, etc.
22 SUITE 110
City & State
23 ORLANDO FL
Zip
24 32819
Country

2a. Mailing Address
26 7680 REPUBLIC DRIVE
Suite, Apt. #, etc.
27 SUITE 110
City & State
28 ORLANDO FL
Zip
29 32819
Country

4. FEI Number
59-3380050

Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
DIAMOND, KEITH D
46 S.W. FIRST STREET, SUITE 400
MIAMI FL 33130

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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 Statutes.

SIGNATURE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
LADHA, ISSA
9020 EASTERLING DRIVE
ORLANDO FL 32819

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
PICCIONE, JOHN
9020 EASTERLING DRIVE
ORLANDO FL 32819

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STD
LADHA, NAVEEN
9020 EASTERLING DRIVE
ORLANDO FL 32819

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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. 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, or on an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/97

467 345 99