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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P96000045448 (3)

B & B NORTH AMERICA, INC.

FILED Apr 28 1998 8:00am Secretary of State



| Principal Place of Business Making Address | | | | | | | | 1 | | | |
|---|--|-------------------|--|---|------------|----------|--|---|---|-----------------------------------|--|
| | 2436 SE 9TH STREET POMPANO BEACH FL 33062-6707 | | | 2436 SE 9TH STREET POMPANO BEACH FL 33062-6707 | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/21/1996 | | | |
| 2. | Principal Place of Business | | | a, Mailing Address | | | | 4. | FEI Number | Applied For | |
| 21 | | | |] | | | | 1 | 65-0676411 | Not Applicable | |
| 22 | Suite, Apt. #, etc. | | | Suile, Apt. #, etc. | | | | 5. | Certificate of Status Desired | \$8.75 Additional Fee Required | |
| 23 | City & State | | | City & State | | | | 6. | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| 24 | Zip | Country Zip 25 29 | | | Country 30 | | 8. | This corporation owes or has paid the curr Personal Property Tax due June 30. | ent year Intangible | | |
| g, Name and Address of Current Registered Agent | | | | | | | 10. Name and Address of New Registered Agent | | | | |
| 400 SE 12TH STREET BLDG. D FORT LAUDERDALE FL 33316 | | | | | | 81 82 | Name Street Addre | oss (P | P.O. Box Number is Not Acceptable) | | |
| | | | | | | 83 | | | | | |
| | | | | | | 64 | 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 Signature, typed or proted name of registered agent and title it applicable (NOTE, Registered Agent signature required when reinstating) DATE | | | | | | | | | | | |
| | Signature, typed or printed name of registered agent and title it applicable (NOTE: Hegistered Agent signature required when reinstaling) DATE | | | | | | | | | | |

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE

TITLE KALESKI, HORST 1.2 NAME NAME 2436 SE 9TH STREET STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062-6707 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition THILE 2.1 TITLE **GUNTERT, WERNER K** NAME 22 NAME 2436 SE 9TH STREET 2.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33082-8707 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-ZiP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 City-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I 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.

6.4 CITY - ST - ZIP

4-21-98

954-772-5189