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 # 1. Corporation Name P96000048613 (9)

BILBAR GROUP INC.

FILED Jan 29 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				f fill bistobs she notice datal op the motive and a state index sizes and				
	D BREEZE WAY ACH FL 33437	6442 EMERALD BREEZE WAY BOYNTON BEACH FL 33437-4152								
222						3. Date Incorporated or Qualified 06/06/1996	3a. E	Date of La	st Repo	ort
	Place of Business	2a, Mailing Address	****			4. FEI Number			Appli	ed For
21 / 732	5 CONGRESS AVE	26			6.50674803 Not Applicable				pplicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired See Require					
City & Stat						Election Campaign Financing \$5.00 May 8				
Zip	SPKINGS FC. Country	Zip	T c	ountry		Trust Fund Contribution 8. This corporation has liability for				
24 3346	61 25 U.S.A.	29	30					Mo No	GI 45. 14	30.002,
/ 3	g Name and Address of Current			\top		10. Name and Address of New Re				
ARG	RAMS, BILL			81	Name		. 			
6442 EMERALD BREEZE WAY						605				
BOYNTON BEACH FL 33437					Street Add	dress (P.O. Box Number is Not Accepta	ble)			
ь	INTON DEACH PL 33437			83						
				84	City		FL	85	Zip Co	de
office or agent. La	to the provisions of Sections 607 0502 registered agent, or both, in the State o am familiar with, and accept the obligation	of Florida. Such change wa ions of, Section 607.0505.	s authoriz Florida Si	ed by atute:	the corpora s.	ition's board of directors. I hereby acce	pt the ap	pointmen	it as rec	jistered
	Signature, typed or printed name of registured agent				int signature requi	ired when reinstating)	DATE			
12.	OFFICERS AND		13			ADDITIONS/CHANGES TO OFFI	CERS AN			
TITLE	D			1.1 TITLE				Cha	nge [Addition
NAME	ABRAMS, BILL	V	4	NAME						
STREET ADDRESS	% 6442 EMERALD BREEZE WA	. T	1.3	STREET	ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL 33437	Lociere		CITY - S	T-ZIP					
TITLE	D	DELETE	2.1	TITLE	ļ			[_] Cha	nge [Addition
NAME	ABRAMS, BARBARA	.,	22	NAME			: -	-		
STREET ADDRESS	% 6442 EMERALD BREEZE WA	i¥	2.3	STREET	ADDRESS					
CITY - ST - ZIP	BOYNTON BEACH FL 33437			CITY	ST-ZIP					
TOLE		DELETE	3.1	TITLE				Cha	nge L	Addition
NAME			3.2	NAME						
STREET ADDRESS			3.3	STREET	ADDRESS					
CITY-ST-ZIP				CITY-	ST-ZIP					
TITLE		DELETE	4 1	TITLE				L Cha	nge L	Addition
NAME			4 :	? NAME						
STREET ADORESS	ļ		43	STREET	ADDRESS					
CITY- S1-ZIP			4.4	CITY-S	T-ZIP					
TITLE		☐ DELETE	5.1	TITLE				Cha	nge [Addition
NAME			5.2	NAME						
STREET ADDRESS			5.3	STREET	ADDRESS					
CITY - ST - ZIP			5.4	CITY-5	it - ZIP					
TITLE		DELETE	6.1	TITLE				Cha	nge	Addition
NAME			6.2	NAME						
STREET ADDRESS										
			6.3	STREET	ADDRESS					
CHTY - ST - ZIP				STREET CITY-:	l l					

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.