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

FILED Jan 30 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State

	1998	DIVISION	OF CORPO	RATI	ONS	Scordary of State
DOCUMENT # P96000048613 (9) BILBAR GROUP INC.						
0.257.11						
Principal Plac	e of Rusiness	Mailing Address				
1732 S. CONGRESS AVE. 6442 EMERALD BREEZE WA						
PALM SPRINGS FL 33461 BOYNTON BEACH FL 33437						DO NOT WRITE IN THIS SPACE
US						3. Date Incorporated or Qualified
						06/06/1996
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21 26			 I,	65-0674803 Not Applicable \$8.75 Additional		
22		27				5. Certificate of Status Desired Fee Required
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	 	untr	,	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Currer	29 Agent	30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
AR.	RAMS. BILL	it riegistered Agent		81	Name	IV. Inditio and Address of New Hegistelett Agent
6442 EMERALD BREEZE WAY				82	Street A	ddress (P.O. Box Number is Not Acceptable)
BOYNTON BEACH FL 33437				83	[
				84	- /	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						
12.	Signature, typed or printed name of registered age OFFICERS AN		(NOTE: Register		ent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE		TITLE		Change Addition
NAME	ABRAMS, BILL		1.21	NAME		
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·				ADDRESS	Į
CITY-ST-ZIP TITLE	BOYNTON BEACH FL 33437 D	DELETE		CITY - S TITLE	ST-ZIP	Change Addition C
NAME	ABRAMS, BARBARA			NAME		Orlange Addition
STREET ADDRESS	% 6442 EMERALD BREEZE W	VAY			ADDRESS	
CITY-ST-ZIP				CITY-	ST-ZIP	
TITLE		DELETE	3,1	TITLE		Change Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE		CITY-:	ST-ZIP	Change Addition
NAME				NAME		E orange E rounding
STREET ADDRESS					ADDRESS	
CITY-ST-ZIF				CITY-5	1	
TITLE		DELETE		TITLE		Change Addition
NAME			5,2 (NAME		
STREET ADDRESS			5,3 \$	STREET	ADDRESS	
CITY-ST-ZIP				cny-s	T-ZIP	
TITLE		☐ DELETE		IITLE		Change Addition

CITY - ST - ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 trustate 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS