

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

FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000071312 (8)

1. Corporation Name
BHNS, INC.



Principal Place of Business
P O BOX 773
TARPON SPRINGS FL 34688

Mailing Address
P O BOX 773
TARPON SPRINGS FL 34688

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 1501 ALTERNATE 195	26 1501 ALTERNATE 195
22 SUITE C	27 SUITE C
23 TARPON SPRINGS FL	28 TARPON SPRINGS FL
24 34689	29 34689
25 FLORIDA	30 FLORIDA

3. Date Incorporated or Qualified	08/27/1996
4. FEI Number	59-3396607
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	81 Name
GASSMAN, ALAN S	82 Street Address (P.O. Box Number is Not Acceptable)
1245 COURT STREET STE 102	83
CLEARWATER FL 34616	84 City
	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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORRMAN, NANCY C	1.2 NAME	
STREET ADDRESS	P O BOX 773 N/A	1.3 STREET ADDRESS	1501 ALT 195 SUITE C
CITY-ST-ZIP	TARPON SPRINGS FL 34688	1.4 CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEWETT, CAROLYN	2.2 NAME	
STREET ADDRESS	P O BOX 773 N/A	2.3 STREET ADDRESS	1501 ALT 195 SUITE C
CITY-ST-ZIP	TARPON SPRINGS FL 34688	2.4 CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANCHEZ, GABRIEL L	3.2 NAME	
STREET ADDRESS	P O BOX 773 N/A	3.3 STREET ADDRESS	1501 ALT 195 SUITE C
CITY-ST-ZIP	TARPON SPRINGS FL	3.4 CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BILIRAKAS, EMMANUEL	4.2 NAME	
STREET ADDRESS	P O BOX 773 N/A	4.3 STREET ADDRESS	1501 ALT 195 SUITE C
CITY-ST-ZIP	TARPON SPRINGS FL	4.4 CITY-ST-ZIP	TARPON SPRINGS FL 34689
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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), 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: _____ 6/23/98

CR2E034 (10/97)