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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000089697 (2)

B & K MARKETING, INC.

FILED Apr 28 1998 8:00am Secretary of State



•	CD	Market Address			 _ IDDA(ABB! 184 IBAND BON)			
	ce of Business	Mailing Address				=		
	E MILE. SUITE 224	220 MIRACLE MILE. S						
CORAL GABLES FL 33134 CORAL GABLES FL 3313			J1 J4		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	• • • • • • • • • • • • • • • • • • • •		
					10/31/1996			
2. Principal F	Place of Business	2a. Malling Address	*******		4. FEI Number App	plied For		
21		26			65-0700949 Not	Applicabl		
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 A			
22		27			Fee Rec	quired		
City & Stal	te	City & State			6. Election Campaign Financing \$5.00			
23		28			Trust Fund Contribution Added to	Fees		
Zφ	Country	Zιρ	 -3	untry	S. The solphate of the part the content year the			
24	25	[29]	30	, -		No		
	9. Name and Address of Cur	rent Hegistered Agent		81	10. Name and Address of New Registered Agent			
	OCKWOOD, KEVIN J			"	I Name			
	O MIRACLE MILE, SUITE 224		8:		2 Street Address (P.O. Box Number is Not Acceptable)	Address (P.O. Box Number is Not Acceptable)		
CO	ORAL GABLES FL 33134							
				83	3			
				84	4 City 85 Zip C	ode		
				Ш	FL 19 20			
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Str	atutes, the a	bove	we-named corporation submits this statement for the purpose of changing its by the corporation's board of directors. I hereby accept the appointment as res.	registerer		
agent. I a	sm familiar with, and accept the ob	ligations of Section 607.0505	Florida Sta	tutes	es.	ogisterou		
SIGNATURE								
	Signature, typed or printed name of registered			d Age	gent signature required when rainstating) DATE			
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Change			
TITLE	PD VENEZUE VENEZUE	☐ DELETE	1.1 ₹)			Additio		
NAME	LOCKWOOD, KEVIN J	***	1.2 N					
STREET ADDRESS	220 MIRACLE MILE, SUITE	224			ET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL 33134	T per exe			-ST-ZIP	- A 4-000-		
TITLE	VSTD	DELETE	2.1 11		· · · · · · · · · · · · · · · · · · ·	Additio Additio		
NAME	FORSHEE, WILLIAM H	***	2.2 N		- I			
STREET ADDRESS	220 MIRACLE MILE, SUITE	224		TREET	ET ADDRESS			
CITY - ST - ZIP	CORAL GABLES FL 33134							
		["-l			-ST-ZIP			
TITLE	i	DELETE	3.1 To	TLE	Change	Additio		
TITLE NAME		OELETE	3.1 To 3.2 N	ITLE AME	Change	Additio		
TITLE NAME STREET ADDRESS		☐ OELETE	3.1 Ti 3.2 N 3.3 S	ITLE AME TREET	E ET ADDRESS	Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			3.1 Ti 3.2 N 3.3 S 3.4 C	ITLE AME TREET A	E ET ADDRESS '- ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DEFELE	3.1 Ti 3.2 N. 3.3 S 3.4 C 4.1 Ti	ITLE AME TREET A SITY-S	E ET ADDRESS -ST-ZIP -ST-ZIP -ST-ZIP -ST-ZIP -ST-ZIP	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N	ITLE AME TREET A DITY-S ITLE IAME	E Change ET ADDRESS -ST-ZIP Change			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			3.1 TI 3.2 N 3.3 S 3.4 C 4.1 TI 4.2 N	ITLE AME TREET A DITY-S ITLE IAME	E ET ADDRESS -ST-ZIP -ST-ZIP -ST-ZIP -ST-ZIP -ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TI 3.2 N. 3.3 S 3.4 C 4.1 TI 4.2 N. 4.3 S 4.4 C	ITLE AME TREET (CITY-S ITLE IAME TREET (ITY-SI	E Change ET ADDRESS -ST-ZIP Change ET ADDRESS -ST-ZIP	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.1 T/ 3.2 N/ 3.3 S/ 3.4 C/ 4.1 T/ 4.2 N/ 4.3 S/	ITLE AME TREET (CITY-S ITLE IAME TREET (ITY-SI	E Change ET ADDRESS -ST-ZIP Change ET ADDRESS -ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TI 3.2 N. 3.3 S 3.4 C 4.1 TI 4.2 N. 4.3 S 4.4 C	THE AME TREET A OTHER TAME TREET A TY-ST TLE	Change E ET ADDRESSST-ZIP Change EF ADDRESSST-ZIP Change	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.1 Ti 3.2 N 3.3 S' 3.4 C 4.1 Ti 4.2 N 4.3 S' 4.4 C 5.1 Ti 5.2 N	THE TREET AME TREET AME TREET ATTY-ST THE TREET AME	Change E ET ADDRESSST-ZIP Change EF ADDRESSST-ZIP Change	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 TI 3.2 N 3.3 S' 3.4 C 4.1 TI 4.2 N 4.3 S' 4.4 C 5.1 TI 5.2 N 5.3 S'	THE AME TREET ITLE IAME TREET ITLE ITLE ITLE AME	ET ADDRESS -ST-ZIP Change ET ADDRESS -ST-ZIP Change ET ADDRESS -ST-ZIP Change ET ADDRESS -ST-ZIP	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TI 3.2 N 3.3 S' 3.4 C 4.1 TI 4.2 N 4.3 S' 4.4 C 5.1 TI 5.2 N 5.3 S'	THE AME TREET AME TREET ATTY-ST THE AME TREET AME TREET AME	E ET ADDRESS -ST-ZIP Change EE Change E Change E Change E Change E Change	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 Ti 3.2 N 3.3 S' 3.4 C 4.1 Ti 4.2 N 4.3 S' 4.4 C 5.1 Ti 5.2 N 5.3 S' 5.4 Ci	ITLE AME TREET, ITLE IAME TREET, ITLE AME TREET, ITLE ITLE	Change E ET ADDRESSST-ZIP Change IE ET ADDRESSST-ZIP Change ET ADDRESSST-ZIP Change Change	☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.1 TI 3.2 N 3.3 S' 3.4 C 4.1 TI 4.2 N 4.3 S' 4.4 C 5.1 TI 5.2 N 5.3 S' 5.4 CI 6.1 TI 6.2 N	ITLE AME YREET, SITLE IAME TREET, ITLE AME AME TREET, ITLE AME TREET, AME AME AME AME AME	Change E ET ADDRESSST-ZIP Change IE ET ADDRESSST-ZIP Change ET ADDRESSST-ZIP Change Change	☐ Additio		

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 trusted expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: