٠ND

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBÉR 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE \$550).

98 NOV 24 PM 4: 34 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham _ SECRETARY OF STATE TALLAHASSEE, FLORIDA ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P9700000101 (0) BVP SOLUTIONS, INC. Mailing Address Principal Place of Business 190 WEST END LANE 190 WEST END LANE **SUITE 2303 SUITE 2303** PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 1 new I rew 01/01/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3417880 P.O. Box 743 PALMERA DR. 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 区 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Ponte Vedra Ponte Trust Fund Contribution Added to Fees 28 Country Country Zip This corporation owes or has paid the current year Intangible <u>us</u>a 32004 30 USA Yes Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PRATT, BARBARA V 190 WEST END LANE Street Address (P.O. Box Number is Not Acceptable) **SUITE 2303** 600002698336 -12/01/98--01012--023 PONTE VEDRA BEACH FL 32082 83 未来来来558 89 *26 Core. 15 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE CR2E034 (5/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PRESIDENT Change Addition BARBARA VAVRECK PRATT 190 W. S NAME 1,2 NAME PAUMERA DRIVE EAST STREET ADDRESS 1.3 STREET ADDRESS <u> ೨೦೭೨</u> 1.4 CiTY ST-ZIP CITY-ST-ZIE Change TITLE DELETE 2,1 TITLE 190 W. End BARBARA VAURECK PRATT 2.2 NAME NAME ByP Lang # 2303 PALMERA DRIVE EAST 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP 2089 3.1 TITLE __ Change TITLE DELETE Addition 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TIRE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE TITLE DELETE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIF

SIGNATURE:

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.

Septemby 26

-*5*88<u>3</u>

904