PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90133 032 ***150.00

DOCUMENT # P9700002093

1. Corporation Name

B'S EXPORT EXPRESS, INC.

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700 E DANIA BCH BLVD #202

VIVIES, PATRICK

DANIA FL 33004

Principal Place of Business	Mailing Address		
700 E DANIA BCH BLVD #202 DANIA FL 33004 US	700 E DANIA BCH BLVD #202 DANIA FL 33004 US		
2. Principal Place of Business	2a, Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		

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9. Name and Address of Current Registered Agent

DO	NOT	WRITE	IN	THIS	SPACE

3. Date Incorporated or Qualifed

01/08/1997

	4.	FEI Number			Appli	ed For
		65-0719032			Not A	Applicable
	5.	Certificate of Status Desired		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees		
	6.	Election Campaign Financing Trust Fund Contribution				
	8.	This corporation owes the curre Personal Property Tax.	ent year	Intangible		No
	10.	Name and Address of New R	tegister	ed Agent		
ires	ss (F	O. Box Number is Not Accepta	ıble)			

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.

Country

82

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Name

Street Ad

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SIGNAT	IIDE
SIGNAI	UKE

JIGHATORE	Signature, typed or printed name of registered agent and title if appl	licable. (NOTE: R	egistered Agent signature requi	red when reinstating) DATE		
12.	OFFICERS AND DIRECTO	ORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change	Addition
NAME	BRISACIER, JEAN		1.2 NAME			
STREET ADDRESS	7608 NW 43RD CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRGS FL 33065		1.4 CITY-ST-ZIP			
TITLE	VPD	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	BRISACIER, JOELLE		2.2 NAME			
STREET ADDRESS	7608 NW 43RD CT		2.3 STREET ADDRESS	*.	•	
CITY-ST-ZIP	CORAL SPRGS FL 33065		2.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		-	
CITY-ST-ZIP			3.4. CITY- ST-ZIP			
TITLE		□ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	•		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME	•		
STREET ADDRESS	<u> </u>		5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		•	
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

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 exceete 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 appears with all other like empowered. with all other like empowered.

SIGNATURE:

OFFICE LU

02/01/99

CR2E034 (11/98)

Zip Code

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