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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P9700009741 (4)

BJBJ, INC.

FILED
May 04 1998 8:00am
Secretary of State

י יעטעט	IV.			I ARRIMAN ING KRINI NARIN BARIN BARIN BARIN BARIN	#
Principal Plac	e al Business	Mailing Address			
·		420 WHITMAN ROAD, SI			
420 WHITMAN ROAD, SE 420 WHITMAN ROAD, SI WINTER HAVEN FL 33884 WINTER HAVEN FL 33884					
				DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2s. Mailing Address		01/31/1997 4. FE Number	Applied For
21 26		 		59-34258/3	Not Applicable
Suite, Apt. #, etc. Suite, Ap		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
27		27		5, Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 g. Name and Address of Current	Registered Agent	30	Personal Property Tax due June 30. 10 Name and Address of New Register	Yes No
DE		Trogratored Agent	81 Name	10. Halle alle Address of Hew Hegister	ed Agent
BENNETT, BARRY W					<u> </u>
60 SECOND STREET, SE WINTER HAVEN FL 33880			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
***	AIGH HAVEN PL 33000		83		
			0.00		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607 1508, Florida Statu	ries, the above-named o	corporation submits this statement for the purpos	e 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 it applicable (NOTE: Registered Ag				equired when reinstating) DAT	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D -	DELETE LA DELETE	1.1 TITLE		Change L Addition
NAME QUINN, BRENDA J PORT NICE		1.2 NAME			
STREET ADDRESS	TEU TITITIMAN NOAD, NOE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	WINTER HAVEN FL 33884	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	BIGGERS, JOHNNIE J 50	c Theas. DELETE	2.2 NAME		C Onunge C Rothlon
STREET ADDRESS 411 SOUTH LAKE FLORENCE DRIVE		2.3 STREET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN FL 33884	DITTE	2.4 CITY-SI-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	GOODWIN, BITSY M		3.2 NAME		ļ
STREET ADDRESS	19 GLIMPSEWOOD LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	MORRIS TOWNSHIP NJ 07960		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	GAFFNEY, JANICE A		4. 2 NAME		
STREET ADDRESS	411 SOUTH LAKE FLORENCE	DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33884	- I on the	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME		- Otter	6.2 NAME		C oracido C vonción
STREET ADDRESS			6.3 STREET ADDRESS		}
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	pertify that the information supplied with	this filing does not qualify t		in Section 119.07(3)(i) Florida Statutes I further	certify that the information

1. 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 chapted, or on an attachment with an address.

SIGNATURE WALL Drenda J. Quinn 4/24/98 324-5269