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

2a. Mailing Address

City & State
MIAMI

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

40th ST

Country USA

81

82

83 84 Name

DOCUMENT # P9700032842 (1)

B.P.I. SERVICES CORP.

FERNANDEZ, MARIA 10821 SW 64TH ST

MIAMI FL 33173

2. Principal Place of Business

Suite Apt. #. etc

Principal Place of Business Mailing Address

10821 SW 64TH ST 10821 SW 64TH ST
MIAMI FL 33173 MIAMI FL 33173

Country

Name and Address of Current Registered Agent

FILED May 14 1998 8:00am Secretary of State

	1 10 12 			
DO NOT WRITE IN THIS SPACE				
3.	Date Incorporated or Qualified			·
	04/10/1997			
4.	FEI Number			Applied For
	65-0753226	0 /		Not Applicable
5.	Certificate of Status Desired	Ø	\$8.75 Additional Fee Required	
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
8.	Personal Property Tax due June 30. Yes No			
10. Name and Address of New Registered Agent				
in Fernandez				
s (P.O. Box Number is Not Acceptable)				

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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DIRECTOR /President/sec. DPTS DELETE Change TITLE 1.1 THILE FERNANDEZ, MARIA NAME 12 NAME 10821 SW 64TH ST STREET ADDRESS 1.3 STREET ADDRESS 33169 **MIAMI FL 33173** CITY-ST-ZIP 1.4 CITY-ST-ZIP DIRECTOR /Vice President/Treas Change DELETE Addition TITLE 2.1 TITLE ENRIQUE R Fernandez 40th ST. GUITE 339 STREET ADDRESS 2.3 STREET ADDRESS 33/65 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Marin Francisco

4/28/98