SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Oct 07 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000040397 (6)

BBC INTERNATIONAL, INC.

Principal Place of Business

CITY-ST-ZIP

3741 SUNNY ISLES BLVD. #233 3741 SUNNY ISLES BLVD. #233 MIAMI FL 33160 MIAMI FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1997 2a. Malling Address FEI Number Applied For 2. Principal Place of Business Not Applicable 26 \$8,75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 26 Zip Country Ζiρ Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GAILES, YVETTE 3741 SUNNY ISLES BLVD. STE 233 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33160 83 Zip Code \$607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the obligations of, section 607.0505, Florida Statutes. Pursuant to the provisions of section istered agent, or both femiliar with and acc agent I am **SIGNATURE** of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) DATE CR2E034 (5/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 FFICERS AND DIRECTORS 13. 12. DELETE 11 TITLE Change Addition TITLE GAILES, YVETTE 1.2 NAME NAME 3741 SUNNY ISLES BLVD. STE 233 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33160** 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.1 TITLE Change Addition DELETE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE Addition DELETE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY-ST-ZIP CITY-ST-ZIP 4 1 T(T) F Addition DELE1E Change 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change 5.1 TITLE DELETE Addition TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZiP CITY-ST-ZIP 6.1 TITLE __ Change ___ Addition TITLE DELETE 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS

6.4 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 experiment with an address