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

1**9**98

DOCUMENT # P97000068998 (8)

BBBS LAND DEVELOPMENT, INC.

FILED
May 26 1998 8:00am
Secretary of State



Principal Place	ce of Business	Mailing Address					
SOI S FLAGLER DR 501 S FLAGLER DR							
SUITE 505	_	SUITE 505					
WEST PALM	BEACH FL 33401	WEST PALM BEACH FL 33401				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address				08/08/1997 4. FEI Number Applied For	
21		26 Suite, Αρτ #, etc.				4. FEI Number Applied For Not Applicable	
Suite, Apl.	#, e]c					\$8.75 Additional	
22						5. Certificate of Status Desired Fee Required	
City & Stat	te	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Z(p)	├ ~~¬	ountry		8. This corporation owes or has paid the current year Intangible	
24	25 25 Name and Address of Currer	29 nt Begistered Agent	30	-1		Personal Property Tax due June 30. Yes (2) No 10. Name and Address of New Registered Agent	
FRIEDLAND, KIRK				81	Name	10, Isame and Address of New Hegistered Agent	
	1 S FLAGLER DR						
	JITE 505			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
	EST PALM BEACH FL 33401			83			
				84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050)2 and 607.1608, Florida S	tatutes, the	above	e-named c	corporation submits this statement for the purpose of changing its registered pretion's board of directors. I hereby accept the appointment as registered	
agent La	registured agent, or both, in the State am f <mark>amiliar with, and accept the oblig</mark>	: 01 Folida, Such change i ations of, Section 607.050	was authoriz 5, Florida S	zed by tatutes	the corpo i.	prefion's board of directors. I hereby accept the appointment as registered.	
SIGNATURE							
10	Signature typed or punted name of registeristing				nt signature re	squired when reinstating) DATE	
12.	CHICERS AN	DIRECTORS DELETE	13	TILLE	т-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	B UTLER, HOWARD G	C) bettie		NAME		Change Addition	
STREET ADDRESS	3989 NW 52ND PLR				ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496		- 1	CITY-S			
TITLE		DELE TE		TITLE		☐ Change ☐ Addition	
NAME			2.2	NAME			
STREET ADDRESS			23	STAFFI	ADDRESS		
CITY-ST-ZIP			2.4	CITY-S	1 - ZIP		
TITLE		DELETE	3.1	THLE		Change Addition	
NAME			3.2	NAME			
STREET ADDRESS			3.3	STREET	ADDRESS		
CITY-ST-ZIP		·· · · · · · · · · · · · · · · · · · ·		CITY-S	T - ZIP		
TITLE		L.) DELETE		TITLE		☐ Change ☐ Addition	
NAME ATREET LIBERTOS				NAME	1		
STREET ADDRESS					AODRESS		
CITY-ST-ZIP TITLE		DELETE	44	CHY-ST	- 7IP	T About 1 Line	
NAME			1	HILE		Change Addition	
STREET ADDRESS			1	NAME	Monoces	20 /20	
CITY-ST-ZIP					ADDRESS	1/4/1/	
TITLE		DELETE		CITY-ST TITLE	- Z(P'	Change Addition	
NAME		L Settle		NAME	1	į į	
STREET ADDRESS					ADDRESS	Din 950	
CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		በ. ለ ማ ድ ብ		
			0.4	VIII - 01	r II		

14. Thereby 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 account report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 appear with an address.

NONATURE X Of / Ret