

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90263 036 \*\*\*150.00

DOCUMENT # P97000082749

1. Corporation Name  
BKB II, INC.

Principal Place of Business  
240 S PINEAPPLE AVENUE  
TENTH FLOOR  
SARASOTA FL 34236  
US

Mailing Address  
240 S PINEAPPLE AVENUE  
10TH FLOOR  
SARASOTA FL 34236  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1997

4. FEI Number

65-0783101

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

BAND, DAVID S  
240 S PINEAPPLE AVE  
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME BAND, DAVID S  
STREET ADDRESS 240 S PINEAPPLE AVE  
CITY-ST-ZIP SARASOTA FL 34236

TITLE D  
NAME BAND, MYRNA L  
STREET ADDRESS 240 S PINEAPPLE AVE  
CITY-ST-ZIP SARASOTA FL 34236

TITLE D  
NAME KAUFFMAN, MARK S  
STREET ADDRESS 455 LONGBOAT KEY RD, #PH 4  
CITY-ST-ZIP LONG BOAT KEY FL 34228

TITLE D  
NAME KAUFFMAN, IRENE E  
STREET ADDRESS 455 LONGBOAT KEY RD, #PH 4  
CITY-ST-ZIP LONG BOAT KEY FL 34228

TITLE D  
NAME BRODSKY, RANDALL I  
STREET ADDRESS 3662 COUNTRY PLACE BLVD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE D  
NAME BRODSKY, RANDI L  
STREET ADDRESS 3662 COUNTRY PLACE BLVD  
CITY-ST-ZIP SARASOTA FL 34233

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 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 attachment with an address, with all other like empowered.

SIGNATURE:

David S. Band  
Director

4/8/99

941-366-6660  
Daytime Phone #

CR2E034 (1/98)