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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

The second second

· (1) · (1)

STREET ADDRESS

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000084726 (3)

B & W MARKETING INC.

Principal Place of Business

FILED Apr 10 1998 8:00am Secretary of State



23 MANGROVE LN. KEY LARGO FL 33037		23 MANGROVE LN. KEY LARGO FL 33037				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/26/1997	
2. Principal Pla	ace of Business	2a. Mailing Addr	2a. Mailing Address			4 CEI Number	
ก		26				Not Applied For Not Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country Zip		Country			8. This corporation owes or has paid the current year intangible	
i	25	29	30			Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curi	rent Registered Agent		ļ.,		10. Name and Address of New Registered Agent	
VALET, WILLIAM G				81	Name		
	MANGROVE LN. Y LARGO FL 33037				Street Ad	t Address (P.O. Box Number is Not Acceptable)	
****	. 21.00 12 00001			83			
				84	City	FL 85 Zip Code	
SIGNATURE _	Signature, typed or printed name of registered OFFICERS A	agent and trie if applicable	(NOTE Registere	d Age	nt signature re	rquired when reinsteting) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
ITLE	D	☐ DE		ITLE		☐ Change ☐ Addition	
AME	VALET, WILLIAM G	_	1,2 N				
STREET ADDRESS	23 MANGROVE LN.		1.3 S	TREET	ADDRESS		
CITY-ST-ZIP	KEY LARGO FL 33037		1.4 C	ITY-S	T-ZIP		
TLE		☐ DE				☐ Change ☐ Addition	
IAME			2.2 N	AME			
STREET ADDRESS			2.3 S	TREET	ADDRESS		
XTY-S1-21P				_	ST-ZIP		
TTLE		□ DE				☐ Change ☐ Addition	
MME			3.2 N		ADDRESS		
STREET ADDRESS CITY-ST-ZIP					ADDRESS ST-ZIP		
MTLE		□ DE			n - Tit	☐ Change ☐ Addition	
AME			4.21				
TREET ADDRESS			4.3 \$	TREET	ADDRESS		
CITY-ST-ZIP				ITY-S	T- ZIP		
TTLE		☐ DE	LETE 5.1 TI	TLE		☐ Change ☐ Addition	
IAME			5.2 N		1		
STREET ADDRESS					ADORESS		
OTY-ST-ZIP		□ DE		ITY-S	T-ZIP	Change Addition	
ITLE		L) UE	LETE 6.1 TI]	C. Criange C. Addition	

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 rue 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 trudge on howered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with anythidress.

1-5-98

305-453-0540