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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000088899 (4)

FILED Mar 24 1998 8:00am Secretary of State

| BK SALES GHOUP, INC. | | | | | | | į | | | | | |
|--|--|---------------------------------|-------------------------------------|--------------------------|-------------|-------------------|-------------|--|-----------------------------|--------------------------------|-----|--|
| | | | A -1 -1 | | | | | | | | | |
| Principal Plac | e of Business | Mailing | | | | | | | | | | |
| 3300 NE 192ND ST SUITE 1812 3300 NE 192ND ST SUIT AVENTURA FL 33180 AVENTURA FL 33180 | | | | | E 1812 | | | DO NOT WRITE IN THIS | SPACE | | | |
| | | | | | | | } | 3. Date Incorporated or Qualified | | | ٦ | |
| | | | | | | | \ \ \ \ \ \ | 10/14/1997 | | | ١ | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | | | | 4. FEI Number | A | pplied For | 1 | |
| 21 | | 26 | | | | | | 65-0793018 | N | lot Applicable | 1 | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired | | Additional | 1 | |
| 22 | | 27 | | | | | | Continuate of Status Deales | Fee R | lequired | 1 | |
| City & Stat | ө | — | City & State | | | | | 6. Election Campaign Financing | | May Be | İ | |
| 23 | | 28 | | | | | | Trust Fund Contribution | | to Fees | 1 | |
| Zip | Country | Zip | | Cou | nıry | | ı | 8. This corporation owes or has paid the cur | _ | | L | |
| 24 | 25 9. Name and Address of Curren | 1 Registered | Agent | 30 | | ············· | | Personal Property Tax due June 30. L 10. Name and Address of New Registered | | No | ┨ | |
| DC. | | t trogratoreu | Agoin | | 61 | Name | | 10. Hanio and Addisse of Hote Hagistered | -April | | 1 | |
| | ED, ALLEN P | | | | | | | | | | 1 | |
| | 90 NE 182ND ST., SUITE 200 MIAMI BEACH FL 33162 | | | | 82 | Street | Addres | s (P.O. Box Number is Not Acceptable) | | | ı | |
| IV. | MIAMI DEACH FL 33 102 | | | ŀ | 83 | | | | | | 1 | |
| | | | | | | | | | | | | |
| | | | | | 64 | City | | FL | 85 Zip | Code | | |
| 11. Pursuant office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State | 2 and 607,150 of Florida, Su | 08, Florida Statut ch change was | es, the at authorized | ove d by | named the corp | corpor | ation submits this statement for the purpose of is board of directors. I hereby accept the app | changing on the changing is | its registered s registered | | |
| agent. I a | m familiar with, and accept the obliga | ations of, Sect | ion 607.0505, Fi | orida Stat | utes | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | nt and title it applica | able (NOI | F: Registered | Ager | of signature | required | when reinatating) DATE | | | L | |
| 12. | OFFICERS AND | | | 13. | - | ii orginatoro | | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTO | RS IN 12 | ١Ę | |
| TITLE | PD | | DELETE | 1.1 TI | LE | | | | Change | Addition | 19 | |
| NAME | KATZ, BRETT | | | 1.2 NA | ME | | | | | | | |
| STREET ADDRESS | 3300 NE 192ND ST., SUITE 1 | 1812 | | 1.3 ST | REET : | ADORESS | | | | | ŀ | |
| CITY-ST-ZIP | AVENTURA FL 33180 | | | 1.4 CI | [Y-\$1 | - ZIP | | | | | 18 | |
| TITLE | \$0 | | DELETE | 2.1 TIT | LE | | | | Change | Addition |]دً | |
| NAME | KATZ, CAROOYN | | | 22 NA | ME | , | Ca | rolyn | | | | |
| STREET ADDRESS | 3300 NE 192ND ST., SUITE 1 | 1812 | | 2.3 ST | neet i | ADDRESS | | • 1 | | | Ĺ | |
| CITY-ST-ZIP | AVENTURA FL 33180 | | | 2.401 | 7Y-\$ | r - ZIP | | | | | ĺ | |
| TITLE | | | DELETE | 3.1 T)T | LE | | | | Change | Addition | ı | |
| NAME | | | | 3.2 NA | ME | | | | | | | |
| STREET ADDRESS | | | | 3.3 ST | REET / | ADDAESS | | | | | | |
| CITY-ST-ZIP | | | | 3.4. CI | TY-S | -ZIP | | | | | 1 | |
| TITLE | | | ■ DELETE | 4.1 TiT | | | | | ☐ Change | ☐ Addition | | |
| NAME | | | | 4. 2 N/ | ME | | | | | | | |
| STREET ADDRESS | | | | 4.3 ST | REET | Address | | | | | ı | |
| CITY-ST-ZIP | | | | 4.4 CIT | Y-ST | - <u>71</u> P | | | | | 1 | |
| TITLE | | | ☐ DELETE | 5.1 TIT | LE | | | | ☐ Change | ☐ Addition | | |
| NAME | | | | 5.2 NA | | | | | | | | |
| STREET ADDRESS | | | | 5.3 STI | REET A | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 5.4 C/I | | - ZIP | | | T 6: | | 1 | |
| TITLE | | | DELET E | 6.1 T(T | | i | | Y | L Change | Addition Addition | | |
| NAME | ı | | | 6.2 NA | | | | | | | | |
| STREET ADDRESS | | | | | | ADDRESS : | | | | | | |
| CITY-ST-ZIP | varify that the information avanticed with | th this files of | one not evalle for | 6.4 CIT | | | ol in Co | ction 119 07(3Vi) Florida Statutes I further ce | etify that the | information | 1 | |
| | | | | | | | | | | | | |

Interest certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.0/(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 eath; that I am an officer or director of the corporation or the receiver or trusted 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.