

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

FILED
Apr 29 1998 8:00am
Secretary of State

| | | |
|--|---|--|
| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # P97000097375 (4)

1. Corporation Name
BMA INVESTMENTS, INC.

Principal Place of Business

Mailing Address

~~4406 NW 36TH STREET~~
~~LAUDERDALE LAKES FL 33319~~

~~4406 NW 36TH STREET~~
~~LAUDERDALE LAKES FL 33319~~



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/12/1997

4. FEI Number

65-0799654

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year intangible

Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 2700 W. Cypress Creek Rd

Suite, Apt. #, etc.

C103

City & State

23 FT. LAUDERDALE FL

Zip

24 33309

Country

25 USA

2a. Mailing Address

26 2700 W. Cypress Creek

Suite, Apt. #, etc.

C103

City & State

28 FT. LAUDERDALE FL

Zip

29 33309

Country

30 USA

9. Name and Address of Current Registered Agent

PIOTROWSKI, JOEL S
317 - 71ST STREET
MIAMI BEACH FL 33141

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 filed if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MARKOSKY, STANLEY
STREET ADDRESS 4406 NW 36TH STREET
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE ☐ DELETE

NAME LOUIS MARIL
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRES, D ☒ Change ☐ Addition

1.2 NAME STANLEY MARKOSKY

1.3 STREET ADDRESS 2700 W. CYPRESS CREEK RD C103

1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33309 ☐ Change ☒ Addition

2.1 TITLE PRESIDENT ☐ Change ☒ Addition

2.2 NAME LOUIS MARK

2.3 STREET ADDRESS 2700 W. CYPRESS CREEK ROAD C, 103

2.4 CITY-ST-ZIP FT. LAUD., FL 33309 ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

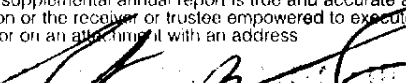
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP ☐ Change ☐ 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 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

SIGNATURE



4/22/98 954973-7779

CR2E034 (10/97)