

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
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90200 045 ***150.00

DOCUMENT # P98000014123

1. Corporation Name
B.N.W.U.S.A., INC.

Principal Place of Business
427 PAPAYA ST.
GOODLAND FL 34140

Mailing Address
427 PAPAYA ST.
GOODLAND FL 34140



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1998

4. FEI Number

59-3512257

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 2396 RAVENNA BLVD

Suite, Apt. #, etc.

22 UNIT 101

City & State

23 NAPLES FLORIDA

Zip

24 34109

Country

25 U.S.A.

2a. Mailing Address

26 2396 RAVENNA BLVD

Suite, Apt. #, etc.

27 UNIT 101

City & State

28 NAPLES FLORIDA

Zip

29 34109

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

BENNETT, COLIN W
427 PAPAYA ST.
GOODLAND FL 34140

10. Name and Address of New Registered Agent

81 Name JEFFREY A. WOOD

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

2396 RAVENNA BLVD.

83 UNIT 101

84 City NAPLES

85 Zip Code

FL 34109

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 JEFFREY A WOOD

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEB 8/99

12. OFFICERS AND DIRECTORS

TITLE DP
NAME WOOD, JEFFREY A
STREET ADDRESS 3057 FIRST ST.
CITY-ST-ZIP BURLINGTON, ONTARIO, CANADA FL 34140

☐ DELETE

TITLE DST
NAME RODZONIAK, HARRY
STREET ADDRESS 205 GREENBRIAR ROAD
CITY-ST-ZIP ANCASTER, ONTARIO, CANADA L9G4V-3

☐ DELETE

TITLE V
NAME BENNETT, COLIN W
STREET ADDRESS 427 PAPAYA ST.
CITY-ST-ZIP GOODLAND FL 34140

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/DIRECTOR
1.2 NAME WOOD JEFFREY A
1.3 STREET ADDRESS 2396 RAVENNA BLVD, UNIT 101
1.4 CITY-ST-ZIP NAPLES 34109

☒ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 8/99

Date

941-514-7374

Daytime Phone #

CR2E034 (11/98)

0901-1337