

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000079073

1. Entity Name

BKV INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90175 003 ***150.00

Principal Place of Business

626 MARSH LANDING PARKWAY
STE #168
JACKSONVILLE BEACH FL 32250

Mailing Address

384 SOUTH FIRST ST
JACKSONVILLE BEACH FL 32250-6707

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

626 MARSH LANDING PKWY

PMB 168

JACKSONVILLE BEACH FL

32250

FL



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3535414

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

VARDEN, BRYAN K
384 SOUTH FIRST ST
JACKSONVILLE BEACH FL 32250

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
VAIRDEN, BRYAN
284 SOUTH FIRST ST
JACKSONVILLE BEACH FL 32250

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BRYAN H. VARDEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/2000 613
(904) 360-3604

CR2E034 (9/99)