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

DOCUMENT # P98000095476

Corporation Name

BERNARD BONCARDO INTERNATIONAL (FLORIDA), INC.

Principal Place of Business 4134 GULF OF MEXICO DR..STE.302 Mailing Address

4134 GULF OF MEXICO DR. STE.302

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90185 014 ***150.00



LONGBOAT KEY	Y FL 34228	LONGBOAT KEY FL 34228		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Quali	fed		
				11/09/1998			
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		Ap	plied For
21 1776 S. TAMAIMI TRAIL 26 1776 S. TAMA			IMI TEALL	62-08-2263		No	t Applicable_
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	d 🗀	\$8.75 <i>A</i>	
22 B	<u></u>	27 B		J. Certificate of Cizido Dedite.		Fee Re	quired
City & State	9	City & State		6. Election Campaign Financi	ng □	\$5.00	
23 UENIC		28 USNICE FLOR		Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Country	8. This corporation owes the	current year Inta		
24 34-29			10 U.S.A.	Personal Property Tax.	D. Internal (⊠ No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of Ne	w Registered A	tgent	
RON	CARDO, BERNARD			BONCARDO , BERNAR	D		
	GULF OF MEXICO DR.,STE.302)	82 Street	Address (P.O. Box Number is Not Acc	eptable)		
	GBOAT KEY FL 34228	•	83	S //D&& OCEANS	PROY B	LUD	
LOIN	ABOAT NET TE 34220		83		•		
			84 City			85 Zip (Code
			ENGL	EMOOD	FL	34	224
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auf	thorized by the corp	corporation submits this statement for oration's board of directors. I hereby a	the purpose of coept the appoir	tment as re	registered gistered
SIGNATURE	•						
OIOIATIONE .	Signature, typed or printed name of registered agen		Registered Agent signature r		DATE	0.00000	DO 11 40
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTO	Addition
TITLE	DP	☐ DELETE		OP		Change	☐ Addidon
NAME	BONCARDO, BERNARD		1.2 NAME	Boncardd. Beenaet			
STREET ADDRESS	4134 GULF OF MEXICO DR.,ST	1E.302	1.3 STREET ADDRESS	11082 OCEANSPERY			
CITY-ST-ZIP	LONGBOAT KEY FL 34228		1.4 CITY-ST-ZIP	ENGLEWOOD FLORIDA	<u> 34224</u>	Change	☐ Addition
TITLE	D	☐ DELETE	2.1 TITLE	D		Change	C3 Modifica
NAME	VEREEN, DONALD		2.2 NAME	uergen, Donald	-		- •
STREET ADDRESS	4134 GULF OF MEXICO DR.,S	IE.302	2.3 STREET ADDRESS	2407 Sofia Lane	C 20 P 2	ı	
CITY-ST-ZIP	LONGBOAT KEY FL 34228		2. 4 CITY-ST-ZIP	PUNTA GORDA FURIDA	33983		☐ Addition
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME		÷		
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		•	☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS	1		4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETÉ	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
			64 CITY-ST-ZIP				

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: 2

RICHATIGE AND TYPED OF DE

BERNARD BONCARDO

F5B.2/99

(94) 493-4886 Daytime Phone #