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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

> Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P98000097508
1. Corporation Name	1 00000001000

BEB, INC.

Pri	ncipal	Place	e of Bu	usiness

Mailing Address

636 PELICAN BAY DRIVE

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636 PELICAN BAY DRIVE DAYTONA BEACH FL 32119 DAYTONA BEACH FL 32119 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/16/1998 2a. Mailing Address Applied For 4. FEI Number 2. Principal Place of Business APPLIED FOR Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zio Country 8. This corporation owes the current year Intangible Zip Personal Property Tax. □No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WELLS, SYLVAN A Street Address (P.O. Box Number is Not Acceptable) 618 N WILD OLIVE AVE DAYTONA BEACH FL 32118 83 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE. ☐ Change ☐ Addition 1.1 TITLE TITLE BEATTIE, BRUCE 1.2 NAME 636 PELICAN BAY DR 1.3 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32119 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME BEATTIE, KAREN NAME 2.3 STREET ADORESS 636 PELICAN BAY DR STREET ADDRESS DAYTONA BEACH FL 32119 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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 juster proposed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if with all other like empowered.

SIGNATURE:

CR2E034 (11/98)