## 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 # P98000106412

1. Corporation Name

B&P, IN	IC.									
Principal Place of Business			Mailing Address				-\	JAR <b>Ba</b> nk <b>a a</b> lkin <b>alab</b> i di	)	
3050 TAMIAMI TR. N.			3050 TAMIAMI TR. N.							
NAPLES FL 34103			NAPLES FL 34103				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
ì							12/21/1998			1
2. Principal P	Place of Business	28	, Mailing Add	fress			4. FEI Number	Apı	plied For	
21		26				;	59-3555117_	No	t Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			i	5, Certificate of Status Desired	<b>\$8.75</b> A Fee Re		
22   City 8 State			City & State						<del></del>	┨.
City & State			City & State				6. Election Campaign Financing \$5:00 May Be Trust Fund Contribution Added to Fees			_
Zip Country			Zip Countr				8. This corporation owes the current year Intangible			Ì
<u> </u>	25		, <sup>'</sup>				Personal Property Tax.			
24		29					10. Name and Address of New Registered Agent			1
9. Name and Address of Current Registered Agent						Name	<u> </u>		_	
PITKII	n, Jerald R esq.				82				<del></del>	ļ
4947 TAMIAMI TR. N., STE. 202						Street Addre	ess (P.O. Box Number is Not Acceptable)			
NAPL	ES FL 34103				83				_	
					84	City		85 Zip C	Code	
44 Burniant	to the provisions of C	actions 607 0502 and	607 1509 Flo	rida Statutos 1	the above	- named come	pration submits this statement for the purpose	_	registered	l
office or r	registered agent, or bo	oth, in the State of Flor ccept the obligations of	ida. Such cha	nge was autho	rized by	the corporatio	n's board of directors. I hereby accept the ap	pointment as rec	gistered	
SIGNATURE	,	<b></b>	-, -	·					-	ļ
SIGNATURE	Signature, typed or printed no	ame of registered agent and title	e if applicable.	(NOTE: Reg	istered Ager	nt signature required				. 6
12.		OFFICERS AND DIR			13.		ADDITIONS/CHANGES TO OFFICERS			1 5
TMLE	PSD	_		DELETE	1.1 TITLE			☐ Change	☐ Addition	,
	Bamberg, Denni				1.2 NAME					3
STREET ADDRESS	613 BEACHWALK	CR. J-201			1.3 STREET	ADDRESS				į
CITY-ST-ZIP	NAPLES FL 34108	<u> </u>			1.4 CITY-S	T-ZIP				ļģ
TITLE	VTD			DELETE	2.1 TITLE			Change	Addition	١,
NAME	PAVEY, STANLEY				2.2 NAME					ł
STREET ADDRESS	2231 KINGS LAKE	BLVD.			2.3 STREET	TADORESS	•			
CITY-ST-ZIP	NAPLES FL 34112	<u> </u>			2.4 CITY-S	ST-ZIP				1
TITLE				DELETE	3.1 TITLE			Change	Addition	
-NAME	شيستوا تو غييب			<u> تاریخ سیمینید</u>	3.2 NAME					
STREET ADDRESS					3.3 STREET	TADDRESS				Ì
CITY-ST-ZIP				_	3.4. CITY+5	IT-ZIP				1
TITLE				DELETE	4.1 TITLE			☐ Change	☐ Addition	ł
NAME	-				4. 2 NAME					
STREET ADDRESS					4.3 STREET	T ADDRESS				
CITY-ST-ZIP					4.4 CITY-S	T-ZIP				1
TITLE	i			DELETE	5.1 TITLE			☐ Change	Addition	1
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET	TADDRESS			!	
CITY-ST-ZIP	,				5.4 CITY-S	T-ZIP				
TITLE				DELETE .	6.1 TITLE			Change	Addition	1

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:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZiP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90157 044 \*\*\*300.00