2003 FOR PROFIT CORPORATION

UNIFORM, BUSINESS REPORT (UBR) P99000107908

DOCUMENT # 1. Entity Name

B D S INVESTMENTS, INC.



FILED Mar 24, 2003 8:00 am Secretary of State

03-24-2003 90140 049 ***150.00

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Principal Place of Business 1975 E SUNRISE BLVD 521 FORT LAUDERDALE FL 33304			Mailing Address 1975 E SUNRISE BLVD 521 FORT LAUDERDALE FL 33304								
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Stat	te		City & State			4.	FEI Number 65-0987037			Applied For Not Applicable	-
Zip Country			Zip	itry	5.	5. Certificate of Status Desired \$8.75 Additional Fee Required				1	
	6. Name a	ind Address of Current	Registered Agent			7.	Name and Address of New R	egistered /	gent		1
					Name						-]=
PITTER, C	CARL S										4
7447 NOF	RTH WEST 5	7 STREET	Street Address			ss (P.O. Box Number is Not Acceptable)					
	FL 33319									•	1
1 AMAGUA	7 1 2 333 13										
					City			FL	Zip Co	ode	7
8 The above	named entity	submite this etatement for	or the purpose of changing its	rogistor	d office or regis	stored so	ent, or both, in the State of Flo		amiliar with	a and accept	-
	tions of register		is the pulpose of changing its	s register	ad office of regis	stereu ay	ent, or both, in the state of Fit	mua. Lami	animar witi	т, апо ассерт	
SIGNATURE .	Signature, typed or	printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature requ	uired when re	einstating)	DATE	· · · · · · · · · · · · · · · · · · ·		
Afte	r May 1, 2003	FEE IS \$150.00*	\)				9. Election Campaign Fir Trust Fund Contributio	~ -		00 May Be] -
Nake Check	k Payable to	Florida Department o	-					_			-
10.		OFFICERS AND	DIRECTORS	11.	,	ΑD	DITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 11	1 .
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NAME	GILL, WADE			NAM	E]						(10/02)
STREET ADDRESS		NRISE BLVD. #405		STRE	ET ADDRESS						4
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Indicated on this report or supplied with this filing does not quality 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 empower this execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all better like empowered.

SIGNATURE:

125-3002