

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

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90013 037 ***150.00

DOCUMENT # S35887

1. Corporation Name

BESS-KOLSKI-COMBS, INC.

Principal Place of Business
10936 NORTH EAST 6TH AVE.
MIAMI FL 33161-7134

Mailing Address
4126 NORLAND AVE.
BURNABY BC., CANADA V5G3S-8

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/06/1991

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

4. FEI Number

65-0254818

Applied For
No Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 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:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DAS
NAME HYNDMAN PETER S.
STREET ADDRESS 4126 NORLAND AVE.
CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8 ☐ DELETE

TITLE VP
NAME CASHNER, JEFFREY L
STREET ADDRESS 801 TEAS RD.
CITY-ST-ZIP CONROE TX 77303 ☐ DELETE

TITLE P
NAME RUSSELL ROBERT D.
STREET ADDRESS 200 NORTH FEDERAL HWY.
CITY-ST-ZIP POMPANO BCH., FL 33062 ☐ DELETE

TITLE ST
NAME ROLLINGS, GREGORY K
STREET ADDRESS 681 NORTH AVE.
CITY-ST-ZIP JONESBORO GA ☒ DELETE

TITLE D
NAME LOEWEN, RAYMOND L.
STREET ADDRESS 4126 NORLAND AVENUE
CITY-ST-ZIP BURNABY BC., CANADA V5G 3S8 ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME PAUL WAGLER
1.3 STREET ADDRESS 4126 NORLAND AVENUE
1.4 CITY-ST-ZIP BURNABY, B.C., CANADA V5G 3S8

2.1 TITLE P ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE V ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE V ☐ Change ☒ Addition
4.2 NAME SEAN M. GILCHRIST
4.3 STREET ADDRESS 801 TEAS ROAD
4.4 CITY-ST-ZIP CONROE, TX 77303-1606

5.1 TITLE AS ☐ Change ☒ Addition
5.2 NAME JOSEPH T. HARDIMAN
5.3 STREET ADDRESS 801 TEAS ROAD
5.4 CITY-ST-ZIP CONROE, TX 77303

6.1 TITLE ST ☐ Change ☒ Addition
6.2 NAME GEORGE M. AMATO
6.3 STREET ADDRESS 4145-58TH STREET
6.4 CITY-ST-ZIP WOODSIDE, NY 11377

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 other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

PETER S. HYNDMAN

April 19, 1999

(604) 299-9321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0001622

CR2E034 (11/98)