FILE NOW: FILING FEE AFTER MAY 1ST 15 \$550.00

•PROFÎT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 16, 1999 8:00 am Secretary of State

02-16-1999 90055 039 ***150.00

B & L D	PRUGS, INC.								
Principal Place of Business Mailing Address								BIBIT BIBIT BIBIT B	lası bikil ikal
1753 N. UNIVERSITY DRIVE 1753 N. UNIVERSITY DRIVI PLANTATION FL 33322 PLANTATION FL 33322 US US						DO NOT WRIT	E IN T <u>HIS</u>	SPACE	
						3. Date Incorporated or Qualifed			
						05/23/1991			Had For
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		1 1 · · ·	olied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					<u> </u>	65-0265699		\$8.75 A	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired		Fee Rea	
City & State City & State						6. Election Campaign Financing		\$5.00	Mav Be
23 28						Trust Fund Contribution		Added to	
Zip Country Zip			Country			8. This corporation owes the curre	nt year In	tangible	
24						Personal Property Tax.			□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered	Agent	
	V DARERT		8	31	Name	,			
LEVY, ROBERT 1753 N. UNIVERSITY DRIVE PLANTATION FL 33322			1	32	Street Addres	ss (P.O. Box Number is Not Acceptal	ole)		
			1	33				100 30491	ik almışta
			L		-		10 to	85 Zip C	12 1 3 Cd - 70 Cd
			1	34	City	•	FL	- `` '	
11. Pursuant	to the provisions of Sections 607.050	32 and 607.1508, Florida Statute	s the abo	ove-	named corpor	ration submits this statement for the p	urpose of	changing its	registered
office or agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flor	uthorized i rida Statut	oy 11 es.	ne corporation	is board of directors, I hereby accept	ine appo	munem as reg	jistered 1
SIGNATURE			_		signature required		DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	gent	signature required	ADDITIONS/CHANGES TO OFF		ND DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1.1 TITL	E		re-pro-		Change	Addition
NAME	LEVY, ROBERT		1.2 NAM			· · · · · ·			
	STREET ADDRESS 1753 N. UNIVERSITY DRIVE			1.3 STREET ADDRESS					}
CITY-ST-ZIP	PLANTATION FL		1.4 CITY		1				Ì
TITLE	VD	☐ DELETE	2.1 TITLE					Change	☐ Addition
	1		2.2 NAM	2.2 NAME		•			
STREET ADDRESS	ATEC N. LININEDOLTY DONE		2.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	PLANTATION FL		2.4 CIT	Y-ST	-ZIP				
TITLE	. ,	☐ DELETE	3.1 TITL	E				Change	☐ Addition
NAME .			3.2 NAM	E				•	ì
STREET ADDRESS	3.33		3.3 STR	EET /	ADDRESS	11 11 11 11 11 11 11 11 11 11 11 11 11	M :116	1 10 1 10 1 \$ 18 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$	61 W 1 K1
CITY-ST-ZIP	•			Y-ST	-ZIP	<u> </u>	1 430	Jan 14-516	4-14-15
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NAME	1		4. 2 NAM	Æ		•			
STREET ADDRESS		•	4.3 STR	EET/	ADDRESS				
CITY-ST-ZIP]		4.4 CITY	-ST-	ZIP		<u> </u>	·	
TITLE		☐ DELETE	5.1 T/TL					☐ Change	☐ Addition
NAME			5.2 NAM						İ
STREET ADDRESS	3				ADDRESS				
CITY-ST-ZIP			-5.4 CITY	_	ZIP	. *			- NA44
TITLE .		· DELETE	6.1 TITL	F	1			Change	☐ Addition
NAME	i								
			6.2 NAM			• * •			
STREET ADDRESS				EET A	ADORESS .				

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 je 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 employered 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 a address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR