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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # S72513

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FILED Feb 02 1998 8:00am Secretary of State

BCF ACQUISITIONS, INC. Principal Place of Business Mailing Address 1401 LEE ROAD 1401 LEE ROAD ORLANDO FL 32810 ORLANDO FL 32810 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/06/1991 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 59-3082463 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζŧρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 29 30 X Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KUEHLER, ERNEST 1401 LEE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32810 83 84 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change __ Addition MUROSKI, JOHN E. NAME 1 2 NAME 1401 LEE ROAD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition ROGERS, DONALD C. NAME 2.2 NAME 1401 LEE ROAD STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE TITLE Addition 3.1 TITLE Channe KUEHLER, ERNEST NAME 3.2 NAME 1401 LEE RD STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 mame appears in Block 12 or Block 13 if changes. — on an attachment with an address.

SIGNATURE: