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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # V44270

(9)

| 1. Corporation BULLD  | OG CAPITAL MANAGEMEI                      | NT, INC.  |                           |  |  |
|---|---|---|---------------------------|--|--|
| Principal Place of Business 33 N GARDEN AVE #750 CLEARWATER FL 94625 US |   | Mailing Address 33 N GARDEN AVE #750 CLEARWATER FL 34625 U\$  |                           | 4 10014 011014 01014 01010 11014 10011 0001 0011 0011 01011 0  | INIS NINGS BINIT NEWLY NINGS ENGI                      |
|   |   |   |                           | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  06/17/1992                                    |  |
| 2. Principal Place of Business  |   | 2a. Mailing Address   |                           | 4. FEI Number  | Applied For  |
| 21  |   | 26  |                           | 59-3131284   | Not Applicable   |
| Suite, Apt  | . #, etc.                                 | Suite, Apt. #, etc.   |                           | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required                      |
| City & Sta  |   | City & State  |                           | 6. Election Campaign Financing Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees                         |
| Zip<br>24 <b>33</b> 7   |   |   | Country<br>30             | This corporation owes or has paid the<br>Personal Property Tax due June 30.                                  | Yes No   |
|   | g, Name and Address of Curr               | ent Registered Agent  | 81 Name                   | 10. Name and Address of New Register   | ed Agent   |
|   | N GARDEN AVE #750<br>LEARWATER FL 34625   |   | 82 Stree<br>83<br>84 City | MARION, BRANDON L.  t Address (P.O. Box Number is Not Acceptable)  33 N. GARDEN AUE  CLEMWATER  F            | PS Zin Code  |
| 11. Pursuant<br>office or<br>agent. I s<br>SIGNATURE                    | C 1/2/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1 | 02 and 602 1508, Florida Statute<br>of of Florida Such change was a<br>gutions of Section 69, 0505, Flo |                           | of corporation submits this statement for the purpose reporation's board of directors. I hereby accept the a | e of changing its registered appointment as registered |
| 12.   |   | ND DIRECTORS  | 13.                       | ADDITIONS/CHANGES TO OFFICERS A  |  |
| TITLE   | X   | ☐ DFLETE  | 13 TITLE                  | CHAIRMAN   | Change Addition  |
| NAME  | POLLACK, RONALD J.                        |   | 1.2 NAME                  | POLLACK, RONALD J.   |  |
| STREET ADDRESS  | 301-B TURNER ST.                          |   | 1.3 STREET ADDRESS        |  | •  |
| CITY-ST-ZIP   | <b>CLEARWATER FL</b>                      |   | 1.4 CITY - ST - ZIP       | CLEARWATER FL 33755  |  |
| TITLE   | CS  | DELETE  | 2.1 TITLE                 | SECRETARY TREASURE   | Change Addition  |
| NAME  | POLLACK, MIREILLE                         |   | 2.2 NAME                  | POLLACK, MIREILE #75   | , <del>-</del>   |
| STREET ADDRESS  | 301-B TURNER ST.                          |   | 2.3 STREET ADDRESS        | 33N CLARDON AVE #15  | 0  |
| CITY-ST-ZIP   | CLEARWATER FL                             |   | 2. 4 CITY - ST - ZIP      | CLEARWASER FL 337:   |  |
| TITLE   | IN PRESIDENT                              | DELETE  | 3.1 TITLE                 | PRESIDENT  | Change Addition  |
| NAME  | MARION, BRANDON L                         |   | 3.2 NAME                  | MARSON, BRANDON L  | •  |
| STREET ADDRESS  | 301-B TURNER ST.                          |   | 3.3 STREET ADDRESS        | 33 N GARDEN AVE #750   | <b>&gt;</b>  |

6.4 CITY-S1-ZIP

14. Thereby 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 of 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 the same legal effect as if made under oath; that I am an address.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - 7iP

4.4 CITY - ST - ZIP

4.1 THLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

CNATURE: WALLEY

**CLEARWATER FL** 

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

NAME

4-22-98

**FILED** 

May 01 1998 8:00am

Secretary of State

Addition

Addition

Addition

Change

Change