

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 16, 1999 8:00 am
Secretary of State

04-16-1999 90110 045 ***150.00

DOCUMENT # V49201

1. Corporation Name
B, J & T INTERNATIONAL, INC.

Principal Place of Business
550 TECHNOLOGY PARK
LAKE MARY FL 32746
US

Mailing Address
550 TECHNOLOGY PARK
LAKE MARY FL 32746
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/06/1992

4. FEI Number
59-3139720

Applied For
Not 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

2. Principal Place of Business
21 9915 TAMIAHI TR. N.

2a. Mailing Address
26 9915 TAMIAHI TR. N.

Suite, Apt. #, etc.
22 SUITE 2

Suite, Apt. #, etc.
27 SUITE 2

City & State
23 NAPLES FL COLLIER

City & State
28 NAPLES FL COLLIER

Zip
24 34108

Zip
29 34108

9. Name and Address of Current Registered Agent

BERMAN, JED
180 S. KNOWLES AVE.
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name THOMAS WANDERON
82 Street Address (P.O. Box Number is Not Acceptable)
9915 TAMIAHI TR. N. #2
83
84 City NAPLES FL 85 Zip Code 34108

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, 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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
VP	SMITH, BARBARA L	662 RED WING DRIVE LAKE MARY FL		<input type="checkbox"/>
P	WORSNOP, TONY	600 PUGH STREET LAKE MARY FL		<input type="checkbox"/>
ST	SMITH, JACK M	662 RED WING DRIVE LAKE MARY FL		<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		320 RUNNING WIND LN MAITLAND, FL 32751		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	1274 HILLSTREAM DR GENEVA, FL 32732		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	320 RUNNING WIND LN MAITLAND, FL 32751		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME			<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME			<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME			<input type="checkbox"/>	<input type="checkbox"/>

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-12-99 (407) 628-3019

CR2E034 (11/98)