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

DOCUMENT # 203048 1. Corporation Name

BRYSON'S INC.

Principal Place of Business

Mailing Address

3790 N.W. 57TH AVENUE VIRGINIA GARDENS FL 33166 3790 N.W. 57TH AVENUE VIRGINIA GARDENS FL 33166

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90201 044 ***150.00



DO NOT	WRITE	IN THIS	SPACE

				DO NOT WRITE IN THIS SPA	10E
				3. Date Incorporated or Qualifed 05/31/1957	
2 Deinsteal D	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Z. Pfincipal P	lace of business	— ·		59-0967604	Not Applicable
21	16 +4-	Suite. Apt. #, etc.			8.75 Additional
Suite, Apt.	#, etc.	27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country Zip Country		8. This corporation owes the current year Intang	ble	
24	25 29 30		Personal Property Tax.		
<u> 1</u>	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered Age	nt
3790	SON, JAMES, JR. D N.W. 57TH AVENUE MI SPRINGS FL 33166	·	84 City	dress (P.O. Box Number is Not Acceptable)	5 Zip Code 33/66
office or r	registered agent, or both, in the State of the familiar with, and accept the obligation	of Florida. Such change was autitions of, Section 607.0505, Florid	s, the above-named cor	rporation submits this statement for the purpose of chation's board of directors. I hereby accept the appointment	nging its registered
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	D	DELETÉ	11 TITLE	7p X	Change
	BRYSON, JAMES, JR.		1.2 NAME	THE BRYSON DAYS	ļ
NAME			1.2 TO THE	200 N.W. 52 th AUX	Ì
STREET ADDRESS	3970 NW 57TH AVENUE		1.3 STREET ADDRESS 3	Variable Contract Co. 33	أمرر
CITY-ST-ZIP	VIRGINIA GARDENS FL	C ASIETE	1,4 CITY-ST-ZIP	INGINIA GARDENS, FL 33	Change
TITLE		☐ DELETE		٠ ـ	ChangeAddition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		}
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	and the second s	Change
NAME		- , , , ,	3.2 NAME		
STREET ADDRESS	i		3.3 STREET ADDRESS		
			3.4. CITY-ST-ZIP		•
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETÉ	4,1 TITLE		Change Addition
NAME		<u> </u>	4. 2 NAME		
			4.3 STREET ADDRESS	• • • •	
STREET ADDRESS	1		4.0 STREET ADDRESS		
		,			
CITY-ST-ZIP		. OEIETE	4.4 CITY-ST-ZIP		1 Change
TITLE		DELETE	5.1 TITLE		Change Addition
		DELETE	5.1 TITLE 5.2 NAME	Ph. 300	Change Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
TITLE NAME			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ring and an interpretation of the state of t	
TITLE NAME STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ring and an interpretation of the state of t	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	36 - 3		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ring and an interpretation of the state of t	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ring and an interpretation of the state of t	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	N - 1	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	ring and an interpretation of the state of t	Change

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.