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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 283055 (2)BRANDA VISTA, INC. Principal Place of Business Mailing Address 4805 BEACH PARK DRIVE 4805 BEACH PARK DRIVE TAMPA FL 33609-3619 TAMPA FL 33609-3619 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/08/1964 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1088258 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 🔀 Yes 30 □ No 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RUBENSTEIN, IRENE B 4805 BEACH PARK DR Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33609 83 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) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change ☐ Addition TITLE 1.1 TITLE NAME RUBENSTEIN, IRENE B. 1.2 NAME 4805 BEACH PARK DR STREET ADORESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE ___ Addition TITLE STD NAME RUBENSTEIN, IRENE B. 2.2 NAME 4805 BEACH PARK DR STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY - ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 31 TITLE MESSHAM, ROWAN L DR. 3.2 NAME NAME 3908 GLENCO COURT 3 3 STREET ADDRESS STREET ADDRESS MURRYSVILLA PA 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME CHELMIS, ELLEN RUBENSTE 4. 2 NAME 2062 GREENWAY AVENUE STREET ADDRESS 4.3 STREET ADDRESS CHARLOTTE NC CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE _ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

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 name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: >

~5118.12511a

P/3/ 286-2725

FILED

Jan 16 1998 8:00am

Secretary of State