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 # 658630

FILED Feb 17, 1999 8:00am Secretary of State

02-17-1999 90080 019 ***150.00

BRITT LAMINATE INCORPORATED						
) MANAGO ORION ANGOL ROMA ORIAN (1991)	ROM BARIO DISA MANA MAN	ii 0:0:
Principal Place of Business Mailing Address				1 100110 01101 01161 10110 01100 11611	auti otott bibti bibti bib	il Disil Bibli 1981
% JAMES GILBERT BRITT % JAMES GILBERT BRITT						
3695 NW 74 ST 3695 NW 74 ST MIAMI FL 33147						
MIAMI FL 33147 MIAMI FL 33147				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 03/07/1980		
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For
21 26			<u>59-2072340</u>	· 1——	lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certifcate of Status Desired		Additional Required
City & State City & State				6. Election Campaign Financing		
23 28		28		Trust Fund Contribution		May Be I to Fees
Zip	Country	Zip	Country	8. This corporation owes the curren		
24	25		30	Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Reg	jistered Age At	,
BRI	TT, JAMES GILBERT		81 Name			
	05 NW 74 ST.		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)	
1	MI FL 33147					6 ft. 748 Wader aus
			83	ر از	人名 法改算	37.12
			84 City			Code
1984950 and	Committee and the Committee of the Commi	The state of the s	自然是 自己的人的 精神的一个多种。	是更新的一个一个一个一个	選引 - 1 タックの ピル ー	T. # 10 . Wallet 1 . 15 . 1 . 1
office or	t to the provisions of Sections 607.050 registered agent, or both, in the State	l2 and 607.1508, Florida Statute of Florida. Such change was au	s, the above-named con	poration submits this statement for the pution's board of directors. I hereby accept the	pose of changing it	s registered
agent. La	am familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statutes.	accept in	ie appointment as it	agistereu
SIGNATURE	Signature, typed or printed name of registered ager	A . Jean W				
12.	OFFICERS AN		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFIC	DATE SPS AND DIRECT	ODC IN 12
TITLE	P	☐ DELETE · ·	1.1 TITLE	ABBITTONIO PRINTINGEO TO OTT TO	☐ Change	Addition
NAME	BRITT, JAMES GILBERT		1.2 NAME		: :	
STREET ADDRESS	3695 NW 74,ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	·	1.4 CITY-ST-ZIP		•	
TITLE	ST	☐ DELETE	2.1 TITLE		Change	Addition
NAME	BRITT, LYDIA		2.2 NAME			_
STREET ADDRESS	!		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		•	
TITLE	VP	DELETE	3.1 TITLE		Change	☐ Addition
NAME	BRITT, RONALD GILBERT		3.2 NAME	•		
STREET ADDRESS	3695 NW 74 ST		3.3 STREET ADDRESS		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	2 21 31214 14
CITY-ST-ZIP	MIAMI FL		3.4. C/TY-ST-ZIP			
TITLE	·	☐ DELETE	4.1 TITLE		☐ Change	∆ Addition
NAME	·		4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		•	
TITLE	<u>`</u>	☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME .	;		5.2 NAME			
STREET ADDRESS	C		5.3 STREET ADDRESS		•	1.
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		·	
NAME		L VELETE	6.2 NAME		☐ Change	☐ Addition
STREET ADDRESS	·					·
CITY-ST-ZIP			6.3 STREET ADDRESS			.
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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 pinan attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-25-99 (305)691-0034 Date Date Phone #

CR2E034 (11/0