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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G89724

1. Corporation Name

M & R BRASS, INC.

Principal Place of Business

2830 FORSYTH RD UNIT 430 WINTER PARK FL 32792 US		2830 FORSYTH RD UNIT 430 WINTER PARK FL 32792 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/13/109/			
2. Principal Place of Business		2a. Mailing Address			03/12/1984 4. FEI Number NOT APPLICABLE		No	plied For t Applicable
Suite, Apt.	#, etc. 	Suite, Apt. #, etc.			55Certifcate of Status Desired	j=	-\$8.75`A Eee:Re	
City & State	<u> </u>	City & State	<u>~/ -\\</u>	/V.C	6. Election Campaign Financing		\$5.00	Mav Be
23		28			Trust Fund Contribution	J 	Added to	· 1
Zip	Country	Zip	Country		8. This corporation owes the current		ngible	ا را
24	25	29 30	L		Personal Property Tax.			XNo
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Regi	stered A	gent	
MON	TALVO, ROBERT A., JR.		l°'		NONE			
2830 FOYRYTH RD			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	+		ĺ
	ER PARK FL 32792		83					
							11	
		_	84	City	•	FL	85 Zip C	;ode
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 inited name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			_	☐ Change	☐ Addition
NAME	MONTALVO, ROBERT A., JR.		1.2 NAME					,
STREET ADDRESS	2830 FORSYTH RD		1.3 STREET	ADDRESS				1
CITY-ST-ZIP			1.4 CITY-\$	T-ZIP				
TITLE	VP □ DELETE 2,1 TI		2.1 TITLE				Change	Addition
NAME	MONTALVO, HELEN		2.2 NAME				1.	ay seresand
STREET ADDRESS	2830 FORSYTH.RD		2.3 STREET	ADDRESS				- 1
CITY-ST-ZIP	WINTER PARK FL	— — — — — — — — — — — — — — — — — — —	2.4 CITY-S	T-ZIP			☐ Change	Addition
TITLE		☐ DELETE	3.1 TITLE				☐ Change	
NAME	•		3.2 NAME					
STREET ADDRESS			3.3 STREET 3.4. CITY-S					
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	SI-ZIP		_	Change	Addition
NAME		_	4, 2 NAME					1
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE	-		5.1 TITLE			_	Change	☐ Addition
NAME		,	5.2 NAME					
STREET ADDRESS			5.3 STREET	TADDRESS				1
CITY-ST-ZIP			5.4 CITY-S	T- ZIP				
TITLE .		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME :	Page 1		6.2 NAME					
STREET ADDRESS			6.3 STREET	T ADDRESS	•			}

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 manged, or on an attachment with any address, with all other like empowered.

6.4 CITY+ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90040 032 ***150.00