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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M12643

1. Corporation Name

NATIONAL BRANDS, INC.

										A1911 91011 1991
Principal Place of Business Mailing Address							, 1981an 1981an			
% ROBERT J. I			ROBERT J. PUCK							
9350 SOUTH DIXIE HIGHWAY. SUITE 900 9350 SOUTH DIXIE MIAMI FL 33156 MIAMI FL 33156				ixie Highway. Suite 900 S			DO NOT WRITE IN THIS SPACE			
MIAMA FE 33130 MIAMI FE 33130						3. Date Incorporated or Qualifed	,	-		
							03/13/1985			
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number		Ap	plied For
21		26					59-2528461		No	t Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75	
22		27							Fee Re	
City & Stat	e	\vdash	City & State				6. Election Campaign Financing		\$5.00	
23			7:-	Cou	ntnı	·	Trust Fund Contribution	4	Added t	o rees
Zip 	Country		Zip Country			This corporation owes the current Personal Property Tax.	-	gible Yes	□No	
24	9. Name and Address of	29 29	tered Agent	[30]			10. Name and Address of New Re			
<u> </u>	5. Name and Address (or current regia	nered Agent		81	Name				
PUC	K, ROBERT J.				_		(D.O. Dave Name) in National Association	-		
9350 SOUTH DIXIE HIGHWAY, SUITE 900					82	Street Addr	eet Address (P.O. Box Number is Not Acceptable)			
MIAN	MI FL 33156				83					
					0.4	014			OF Zin (Code
					84	City		FL	85 Zip (200e
11. Pursuant	to the provisions of Sections	607.0502 and 6	07.1508, Florida Statu	ites, the al	oove	named corp	poration submits this statement for the pu	rpose of ch	anging its	registered
office or r	egistered agent, or both, in t m familiar with, and accept t	the State of Florid	da. Şuch change was a	authorized	i by t	he corporate	on's board of directors. I hereby accept	ine appointr	nent as re	gistered
-			,							}
SIGNATURE	Signature, typed or printed name of re-	gistered agent and title	if applicable. (NOT	E. Registered	Agent	signature require	d when reinstating)	DATE		
12.		CERS AND DIRE		13.			ADDITIONS/CHANGES TO OFFI			
TITLE	DCB		☐ DELETE	1,1 TIT				L	_ Change	Addition
NAME	BLANK, JEROME			1.2 NA	ΜE					
STREET ADDRESS	9350 S DIXIE HWY, #9	41)1)								
CITY OF 710	6 41 4 5 44 (*)	,,,,		■ 1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	MIAMI FL			1.3 ST		-ZIP			Change	☐ Addition
TITLE	Ρ		☐ DELETE	S/					Change	☐ Addition
TITLE NAME	P Blank, andrew		DELETE	SI H E				[Change	☐ Addition
TITLE NAME STREET ADDRESS	P BLANK, ANDREW 9350 S DIXIE HWY, #9		☐ DELETE	SI HE	ot. G/ R_6	ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL		, ,	\$1 H E	OT.	ZIP			- · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO		☐ DELETE	SI H E	CALLETTY-ST	ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO BLANK, MARK	900	, ,	\$1 H E 240 3710	TY-ST	ZIP			- · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO BLANK, MARK 9350 S DIXIE HWY, #9	900	, ,	240 240 37N 33ST	TY-ST QLP WIE	ZIP ZIP ZIP ADDRESS			- · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO BLANK, MARK 9350 S DIXIE HWY, #9 MIAMI FL	900	□ DELETE:	Z400 7 TT 3.357 3.4.00	TY-ST REET	ZIP ZIP ZIP ADDRESS		1	Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO BLANK, MARK 9350 S DIXIE HWY, #9 MIAMI FL VP BLANK, TONY	900	□ DELETE:	Z 4 CC	TY-ST PLE ME: ME: ME: ME: ME: ME: ME: ME: ME: ME	ZIP -ZIP -ZIP ADORESS -ZIP		1	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P BLANK, ANDREW 9350 S DIXIE HWY, #9 MIAMI FL DCEO BLANK, MARK 9350 S DIXIE HWY, #9 MIAMI FL VP BLANK, TONY 9350 S DIXIE HWY, #9	900	□ DELETE:	Z 400 3 117 3 2 N 3 3 5 5 3 4 0 4 1 17 4 2 N 4 3 51	TTY-ST QE REET!	ZIP S -ZIP ADORESS -ZIP ADORESS		1	Change	Addition
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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 or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

MIAMI FL