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PROFIT CORPORATION annual report



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P93000049711 (3)

GREAT BRITISH INVESTMENTS, INC.

Principal Place of Business 119-143 NW 9TH AVE.

Mailing Address

19721 S.W. 79 PL

FILED Feb 24 1997 8:00am Secretary of State



| HOMESTEAD F | L 33034 | MIAMI FL 33189-2151 | | | | | | | | |
|---------------------------|---|---------------------------------|--|------------|-------------|---|---|---------------------------------------|------------------------|--|
| | | | | | | 3. Date Incorporated or Qualified 07/15/1993 | | 3a. Date of Last Report 10/03/1996 | | |
| 2. Principal Pl | ace of Business | 2a. Malling Address | | | | 4. FEI Number | *************************************** | } | Applied For | |
| 21 | | 26 | ··· | | | 65-0479712 | | | lot Applicable | |
| Suite, Apt. (| #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | * | Additional Required | |
| City & State 23 | | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | 0 May Be I to Fees | |
| Zip 24 | Country 25 | Zip 29 | Count | ry | | 8. This corporation has liability for Florida Statutes | intangible Yes | | s. 199,032, | |
| | 9. Name and Address of Curre | nt Registered Agent | | | 1 | Name and Address of New Re | gistered | Agent | | |
| COP | RPORATION SERVICE COMPAN | Υ | € | 1 Nan | ne | | | | | |
| | 1 HAYS STREET LAHASSEE FL 32301 | | 8 | 2 Stre | et Address | (P.O. Box Number is Not Acceptate | ole) | | ····· | |
| 1AL | DATIAGGEE PE 32301 | | 8 | 3 | | | | | | |
| | | | Ē | 4 City | | · · · · · · · · · · · · · · · · · · · | FL | 85 Zip | Code | |
| agent. Lar SIGNATURE | o the provisions of Sections 607.05/ egistered agent, or both, in the State in familiar with, and accept the oblic Standing by clarifications of egisterious | jations of, Section 607.0505, | s authorized Florida Statul Ote Registered | es. | | | DATE | ointment a | is registered | |
| 12. | | ID DIRECTORS . | 13. | | ******** | ADDITIONS/CHANGES TO OFFICE | ERS AND | DIRECTO | RS IN 12 | |
| ווונ | P | ☐ DELETE | 1,1 7171 | [| | | | Change | Addition | |
| NAME | renshaw, matthew r | | 1,2 NAM | E | | | | | | |
| STREET ADDRESS | 19721 SW 79 PL. | | 1.3 \$TR | ET ADDRES | SS | | | | | |
| CITY - ST - ZIP | MIAMI FL 33189 | V | 1.4 CiTy | -\$1~ZIP | | | | | | |
| TIILE | VS | DELETE | 2.1 TITL | E | | | | Change | Addition | |
| NAME | ALEXANDER, VALERIE ANN | | 2.2 NAM | | | | | | | |
| STREET ADDRESS | 19721 SW 79 PL. | | | ET ADDRES | SS | | | | | |
| CITY - ST - ZIP | MIAMI FL 33189 | DELETE | | -ST-ZIP | | | | Change | Addition | |
| TIFEE | | [_] beter | 3 1 TITL 32 NAM | | İ | | | L. Change | Addition | |
| NAME Proces Asigned | | | | ET ADDRES | . | | | | | |
| STREET ADDRESS CITY-ST-7P | | | • | · ST - ZIP | 33 | | | | | |
| TITLE | | DELETE | 41 TiTL | | | | · · · · · · · · · · · · · · · · · · · | Change | Addition | |
| NAME | | | 4 2 NAI | | | • | | | | |
| STREET ADDRESS | | | 4 3 STR | EET ADDRES | ss | | | | | |
| CITY-S1-Z-P | | | 4.4 CiTY | -ST-ZIP | | | | | | |
| TITLE | | DELETÉ | 5.1 TITL | ~~~~~~ | | *************************************** | | Change | Addition | |
| NAME. | | • | 5.2 NAN | Æ . | | | 100 | | | |
| STREET ADDRESS | | • | 5.3 STR | EET ADORES | ss | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY | -ST-ZIP | | | | | | |
| TITLE | | DELETE | 6.1 TITL | E | | | | Change | Add tion | |
| NAME | | | 6.2 NAA | lέ | 1 | • | | | | |
| STREET ADDRESS | | | 6.3 STR | ET ADDRES | ss | | | | | |
| C(Ty - ST - 2)P | | | | -\$T-ZIP | | 2" | | | | |
| | by certify that the information supplied | ed with this filing does not gu | alify for the e | xemptio | n stated in | Section 119.07(3)(i), Florida Statute | s. I furthe | r certify the | at the | |

From the copy can your tree information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that have 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:

904-252-5555