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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000089334**1. Corporation Name

THE BREMER GROUP SALES, INC.

							e t 10114 (8188 11)	EB 14114 B184 1884
Principal Plac	ce of Business	Mailing A	ddress					
	OHNS IND. PKWY.		. JOHNS IND. P	KWY				
JACKSONVILLE FL 32246			JACKSONVILLE FL 32246			DO NOT WRITE IN THIS SPACE		
us us						3. Date Incorporated or Qualifed		
						12/08/1994		
2. Principal F	Place of Business	2a. Mailin	g Address			4. FEI Number	· A	pplied For
21		26				59-3290344		lot Applicable
Suite, Apt	. #, etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired	• .	Additional Required
City & Sta	ite	City &	State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	•	to Fees
Zip	Country	Zip		Cou	ntry	8. This corporation owes the current year i	ntangible	
24	25	29		30		Personal Property Tax.	☐ Yes	ΣΝο
	9. Name and Address of Curr	rent Registered A	gent	·		10. Name and Address of New Registere	d Agent	
555	- HED - DOOD I				81 Name			
BREMER, ROSS L 11243-5 ST. JOHN'S INDUSTRIAL PARKWAY S.				82 Street Add	ress (P.O. Box Number is Not Acceptable)			
JAC	CKSONVILLE FL 32246				83		i (1) (1) (1)	
					84 City	(海底 1) 2 (1) 2 (1) 2 (1) 2 (1) 3 (85 Zip	Code
	_				Gity	F	L ⁶³ ^{2,5}	0000
tto agent. La	am familiar with, and accept the obli	0502 and 607.1508 ate of Florida, Such igations of, Section	3, Florida Statute n change was ai n 607.0505, Flor	es, the at uthorized rida Statu	bove-named corporat to by the corporat utes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as r	egistered egistered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicabl	e. (NOTE:	Registered	Agent signature requir	ed when reinstating); 150372 DATE		2 () 1 · 1
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	ORS IN 12
TITLE	DPST	,	☐ DELETE	1.1 TIT	TLE .	72 7296741	☐ Change	☐ Addition
NAME	BREMER, ROSS L			1.2 NA	ME	State of the State		i
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CITY-ST-ZIP	1	I HIAL PKWY		1.3 ST	REET ADDRESS			
CITT-OT-EII	J JACKSONVILLE EL 32246	SIMIAL PRWY				4 A		
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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 supplier filal 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 pussee 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 adactory with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90093 023 ***150.00