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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

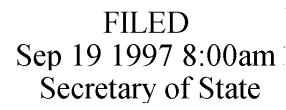
Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000084291 (9)

**BRETT JAMES CORPORATION** 

Principal Pla	ace of	Business
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Mailing Address





2927 RHONE ( PALM BEACH	ORIVE GARDENS FL 33410	2927 RHONE DRIVE PALM BEACH GARDENS	FL 33410-1	265						
***						3. Date Incorporated or Qualified 10/10/1996	3a. Da	e of Las	t Report	
2. Principal Place of Business 21		26. Mailing Address	¬		4. FEI Number 65-0699913			Applied For		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	<del></del>				\$8.7	Not Applicable  5 Additional	3	
22		27	27		5. Certificate of Status Desired			Required		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees	
Zip 24	Country 25	Zip 29	Cour 30	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes X No				
	9. Name and Address of Curre	ent Registered Agent		81		10. Name and Address of New Reg	istered A	gent		
EEV/	LE, JAMES D			61	Name					
BEVERLY & TITTLE PA 823 NO OLIVE AVENUE					Street Add	dress (P.O. Box Number is Not Acceptable)				
WES	ST PALM BEACH FL 33401			83						
				84	City	Marine de constituir de la constituir de	FL	85 Z	ip Code	7
11. Pursuant t	lo the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the ab	ove-	named cor	rporation submits this statement for the po	rrocco of	 changin	g its registered	Н
DITICE OF R	egistered agent, or both, in the Stal m familiar with, and accept the obli	e of Florida. Such change was	authorized	Dy I	the corpora	ation's board of directors, t hereby accep	t the appo	intment	as registered	i
SIGNATURE	<del></del>									
12.	Signature, typed or printed name of registered a	gent and little if applicable (NOT ND DIRECTORS		Agenl	l signature requ	uired when reinstaling)	DATE		<del></del>	ـ اـ
TITLE	D OFFICERS AI	ND DIRECTORS  DELETE	13.		····	ADDITIONS/CHANGES TO OFFICE		Chang		_  <b>է</b>
NAME	WEINSTEIN, HARRIS	□ better	1.2 NA				Į.	Gliang	le 🔲 Addition	9
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NAME			6.2 NAN	18			_	_ •		
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CITY-ST-ZIP			6.4 CITY	'-ST	ZIP					
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14. I do 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 dip an attackment with an address.

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