


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000070908  
1. Entity Name  
B.R.E. ENTERPRISES, INC.



Principal Place of Business      Mailing Address  
441 SW 8TH STREET      443 SW 8TH STREET  
MIAMI, FL 33130      MIAMI, FL 33130



01222005    No Chg-P    CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0939955	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
OCNER, BENJAMMIN A  
441 SW 8TH STREET  
MIAMI, FL 33130

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and file if applicable      (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	OCNER, BENJAMIN A
STREET ADDRESS	110 ISLAND DRIVE
CITY - ST - ZIP	KEY BISCAYNE, FL 33149
TITLE	SD
NAME	RODRIGUEZ, ROGELIO
STREET ADDRESS	501 NW 88TH AVENUE
CITY - ST - ZIP	PEMBROKE PINES, FL 33024
TITLE	TD
NAME	RODRIGUEZ, EDUARDO
STREET ADDRESS	3556 SW 180TH WAY
CITY - ST - ZIP	MIRAMAR, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000257382  
03/09/05-80053-006 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE  BENJAMIN OCNER P/D 2/24/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #