

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 665950

Entity Name: BRAMAN IMPORTS, INC.**Current Principal Place of Business:**7000 CORAL WAY
MIAMI, FL 33155**Current Mailing Address:**2060 BISCAYNE BLVD
2ND FL
MIAMI, FL 33137 US**FEI Number:** 59-1991490**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LEIBOWITZ, DAVID SEYMOUR
2060 BISCAYNE BLVD
2ND FL
MIAMI, FL 33137 US*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.***SIGNATURE:** DAVID LEIBOWITZ

02/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CPD
Name BRAMAN, NORMAN
Address 2060 BISCAYNE BLVD, 2ND FL
City-State-Zip: MIAMI FL 33137

Title VP
Name SHACK, ALEX
Address 2060 BISCAYNE BLVD, 2ND FL
City-State-Zip: MIAMI FL 33137

Title ASST. SECRETARY
Name KRIEGER, STANLEY J.
Address 2060 BISCAYNE BLVD, 2ND FL
City-State-Zip: MIAMI FL 33137

Title D
Name BRAMAN, IRMA MILLER
Address 2060 BISCAYNE BLVD, 2ND FL
City-State-Zip: MIAMI FL 33137

Title AS
Name GRECEK, TIMOTHY JOHN
Address 2060 BISCAYNE BOULEVARD 2ND FL
City-State-Zip: MIAMI FL 33137

Title SECRETARY
Name LEIBOWITZ, DAVID SEYMOUR
Address 2060 BISCAYNE BOULEVARD
2ND FLOOR
City-State-Zip: MIAMI FL 33137

Title T
Name KOTZEN, RICHARD H
Address 2060 BISCAYNE BOULEVARD
2ND FLOOR
City-State-Zip: MIAMI FL 33137

Title ASSISTANT SECRETARY
Name SHACK, BRIAN
Address 2060 BISCAYNE BLVD
2ND FLOOR
City-State-Zip: MIAMI FL 33137

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NORMAN BRAMAN

PRESIDENT

02/10/2021

Electronic Signature of Signing Officer/Director Detail

Date