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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 451161

BROTHERS INTERNATIONAL, INC.

**FILED** Mar 05 1998 8:00am Secretary of State

Principal Place of Business Malling Address 3050 LAKE HARTRIDGE 3050 LAKE HARTRIDGE WINTER HAVEN FL 33881 WINTER HAVEN FL 33881 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/29/1974 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1534669 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country **Z**ip 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JOHNSON, ROBERT L Name 9 ROCKY CREEK TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) ORMOND BCH FL 32174 83 BEACH 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE MOBERT r. 20HN20N ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11 TITEF JOHNSON, RICHARD G NAME 1.2 NAME 3050 LAKE HARTRIDGE STREET ADDRESS 1.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 1.4 CITY - ST - ZIP SDT DELETE TITLE 2.1 TITLE Change Addition JOHNSON, ROBERT L 2.2 NAME 220 S. RIDGEWOOD AVE- , SMITE 200 9 ROCKY CREEK TRAIL STREET ADDRESS 2.3 STREET ADDRESS ORMOND BCH, FL 00000 2.4 CITY-ST-ZIP DAYTONA BBACH, FL. 32114 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP

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 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

L. ZOHNSON 2-22-98 904-255-1981 SIGNATURE