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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 507405

(9)

RRANT INVESTMENT CORPORATION

Suite, Apt. #, etc. 22 City & State 23 Holly wood Fl Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State			3. Date Incorporated or Qualified 07/13/1976 4. FEI Number	3a. Date of Last 11/26/1996	Report
21 3840 No 38 Ave Suite, Apt. #, etc 22 City & State 23 Holly wood H Zip Country	26 Suite, Apt. #, etc. 27 City & State	, 1-11		4. FEI Number		
Suite, Apt. #, etc. 22] City & State 23	Suite, Apt. #, etc. 27 City & State	,1-11 , , , 748.		1	1 14	applied For
Suitc, Apt. #, etc 22 City & State 23 Holly wood Country	27 City & State			59-1698039 Not Applicab 5. Certificate of Status Desired Sa.75 Additional Fee Regulred		
City & State 23 Holly wood Country	City & State					
Zip Country				6. Election Campaign Financing		May Be
Zip Country	28			Trust Fund Contribution		to Fees
	Zip	Count	ry	8. This corporation has liability for i		s. 199.032,
24 3302 (- /9 3 (25	29 tegistered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
BRANT, BENJAMIN, J.		8	1 Name			
3840 NORTH 38 AVENUE		B	2 Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
HOLLYWOOD FL 33021						
		8	3			
		8	4 City		FL 85 Zip	Code
SIGNATURE Signature typed or panied name of registered agent at 12. OFFICERS AND D		TE: Registered A	gent signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTO	DRS IN 12
TITLE PD	☐ DEL e te	1.1 1111			☐ Change	Addition
NAME BRANT, LAWRENCE T.		1.2 NAM	E ·			
STREET ADDRESS 3904 DURANGO CORAL GABLES FL 33134		1	ET ADDRESS			
CITY-SI-ZIP CORAL GABLES FL 33134	DELETE	14 CITY 21 TITUE			Change	Addition
NAME BRANT, BENJAMIN J.	NAC	2.2 NAM	1			
STREET ADDRESS 3840 NORTH 38 AVENUE		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP HOLLYWOOD FL 33021			-ST-ZIP		77.	1 2 4 1 49
TITLE	DETELE	3.1 TITLE 3.2 NAM)		L] Change	Addition
NAME STREET ADDRESS			ET ADDRESS			
City - ST- ZiP			/-ST-ZIP			
TIPLE	DELETE	4.1 TiTLE			☐ Change	Addition
NAME		4. 2 NAN	, l			
STREET ADDRESS			ET ADDRESS - -ST-ZIP			
CITY-ST-7%	DELETE	5.1 TITLE			Change	Addition
NAME	_	5.2 NAM	i			
STHEET ADDRESS		5.3 STRE	ET ADDRESS			
CITY - ST - ZIP	1 200		-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————	14300
TILE	☐ DELETE	6.1 TiTLE			☐ Change	Addition
NAME organization		6.2 NAM	EET ADDRESS			
STREET ADORESS CHY-ST-ZPP		6.4 CITY	ĺ			
14. I do hereby certify that the information supplied w information indicated on this annual report or sup	vith this filing does not qua	lify for the e	xemption state	d in Section 119.07(3)(i), Florida Statute	s. I further certify the	at the