· 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 08:00 AM Secretary of State

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BRANT INVESTMENT CORPORATION



Principal Place of Business

Mailing Address

3840 NO 38TH AVE HOLLYWOOD, FL 33021-1931 US

3840 NORTH 38 AVENUE HOLLYWOOD, FL 33021



04072005

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1698039

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

BRANT, BENJAMIN, J. 3840 NORTH 38 AVENUE

DO NOT WRITE

HOLLYWO	OOD, FL 33021			IN T	THIS SPACE		
	named entity submits this statement for the pitions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or bol	th, In the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed norms of registered agent and title it	fapplicable (NOTE: Registered	Agent signature	required When reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing []	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRANT, LAWRENCE T. 10248 EL CABALLO COURT DELRAY, FL 33446				Unnonnannette		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRANT, BENJAMIN J. 3840 NORTH 38 AVENUE HOLLYWOOD, FL 33021				000000330575 04/25/05-80164-013 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. Thereby 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 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:

CITY - ST-ZIP

IGNATINE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR