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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **566544** **(3)**

1. Corporation Name

HOUSE OF BRASS, ETC., ETC., INC.

Principal Place of Business	Mailing Address
% DOUGLAS ENGLISH 12201 N.W. 35TH ST. CORAL SPRINGS FL 33065	% DOUGLAS ENGLISH 12201 N.W. 35TH ST. CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified: **02/23/1978**
3a. Date of Last Report: **01/18/1995**

4. FEI Number: **59-1797269** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☒ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 HOUSE OF BRASS	26 HOUSE OF BRASS
Suite, Apt. #, etc. 22 12201 NW 35th STREET	Suite, Apt. #, etc. 27 12201 NW 35th STREET
City & State 23 CORAL SPRINGS FLORIDA	City & State 28 CORAL SPRINGS FLORIDA
Zip 24 33065 Country 25 USA	Zip 29 33065 Country 30 USA

9. Name and Address of Current Registered Agent

ENGLISH, DOUGLAS
14110 APPALACHIAN TRAIL
DAVIE FL 33325

10. Name and Address of New Registered Agent

81 Name: HAROLD L. BLINDERMAN
82 Street Address (P.O. Box Number is Not Acceptable): 8111 NORTHWEST 91ST AVENUE
83
84 City: TAMARAC **FL** 85 Zip Code: 33321

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] PRESIDENT 1/25/96
(Signature of appointed registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BLINDERMAN, HAROLD 8111 N.W. 91ST AVE TAMARAC FL	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	V CAROL ENGLISH 14110 APPALACHIAN TRAIL DAVIE FL 33325	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BLINDERMAN, DAVID 4927 S HEMINGWAY CIRCLE COCONUT KEY MARGATE FL	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BLINDERMAN, DAVID 1006 CORAL CLUB DR. PARKLAND FL	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ENGLISH, DOUGLAS 14110 APPALACHIAN TRAIL DAVIE FL	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] HAROLD L BLINDERMAN P 1-25-96 954-752-1030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #