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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

6241 S.W. 15TH ST.

PLANTATION FL 33317

DOCUMENT # 657790 1. Corporation Name BRUNNER & ASSOCIATES, INC.

Principal Place of Business		

Mailing Address

6241 S.W. 15TH ST. PLANTATION FL 33317

FILED Feb 16, 1999 8:00am Secretary of State

02-16-1999 90012 048 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/03/1980

o Data six at Dis	non of Business	2a. Mailing Address			4. FEI Number	Ap	oplied For
2. Principal Pia	ace of Business	26			59-1979043	No.	ot Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	Additional equired
2		27			5 5 5 Compains	\$5,00	May Be
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	1	to Fees
3		28	Cauntai				
Zip	Country	Zip Country			This corporation owes the current Personal Property Tax.	K Yes	□No
	25	29 30	<u> </u>		10. Name and Address of New Reg	istered Agent	-
	9. Name and Address of Curren	Registered Agent	81	Name	10. Name and Address of its trans		
DDI II	MINED HENDY D		"				
	BRUNNER, HENRY R. 82 Street Address (P.O. Box Number is Not Acceptable)					•	
	SW 15TH ST		83			THE PARTY NAMED IN	VI 4 4 7 1331
PLAN	NTATION FL 33317		83			是自己的	
			84	City	The second secon	85 Zip	Code
			1 1	-			o registered
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes.	the above	e-named corpo	oration submits this statement for the pun's board of directors. I hereby accept the	ne appointment as re	egistered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	ions of, Section 607.0505, Florid	a Statutes			·	Ì
			•			-	{
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE: Re	gistered Agen	nt signature required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	OPS IN 12
12.		D DIRECTORS	13.	 -		Change	Addition
TITLE	PD	☐ DELETE	1.1 TITLE			Onlings	
NAME	Brunner, Henry R.		1.2 NAME				1
STREET ADDRESS	6241 SW 15TH ST		1.3 STREET	T ADDRESS			
CITY-ST-ZIP	PLANTATION FL		1.4 CITY-S	T-ZIP			TTI Addition
TITLE		☐ DELETE	2.1 TITLE			Change	Addition .
NAME			2.2 NAME				
			2.3 STREE	TADDRESS		•	
STREET ADDRESS			2.4 CITY-9	ST-ZIP			
CITY-ST-ZIP		☐ DELETE	3.1 TITLE			☐ Change	Addition
TITLE			3.2 NAME		,		
NAME .			3.3 STREE	T ADDRESS		ه و راهین از هایی ا	and a factorist
STREET ADDRESS			3.4. CITY-5	Ì		约小 拉马维键	(制)、均利器
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TITLE		<u></u>	4. 2 NAME				
NAME				T ADDRESS		•	
STREET ADDRESS							
CITY-ST-ZIP		□ DELETE	4.4 CITY-S 5.1 TITLE	οι-ΔΙΡ		Change	e Addition
TITLE			5.1 IIILE 5.2 NAME		Contraction of		
NAME				T ADDRESS	•		
STREET ADDRESS	3				• :		
CITY-ST-ZIP	<u> </u>		5.4 CITY-S 6.1 TITLE	21-ZIF	<u> </u>	☐ Change	e Addition
TITLE	4	☐ DELETE	6.2 NAME		•		_
NAME	1			1			
STREET ADDRESS	8			ET ADDRESS			
CITY-ST-ZIP			6.4 CITY-		Onetice 440 07/2/() Florida Statutas 14	urther certify that the	e information
14. I hereby	certify that the information supplied w	ith this filing does not qualify for	tne exemp ate and tha	non stated in t at my signatur	Section 119.07(3)(i), Florida Statutes. I f e shall have the same legal effect as if r	nade under oath; the	at I am an

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. I filling certify that I am an 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, with all other like empowered.

SIGNATURE:

Henry R. Bru

STURNES THE WRY

R. BROWNER

PRES. 1

1-15-9 951-583ate Daytime Phone # CR2E034 (11/