

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

FILED  
Feb 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

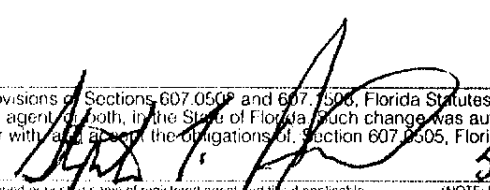
**DOCUMENT # 697442 (2)**

1. Corporation Name  
**BREXEL ENTERPRISES, INC.**

Principal Place of Business <b>824 DOGWOOD ROAD NORTH PALM BCH. FL 33408</b>	Mailing Address <b>824 DOGWOOD ROAD NORTH PALM BCH. FL 33408-4136</b>
---	--



2. Principal Place of Business <b>3078 CASA RIO COURT</b> Suite, Apt. #, etc.		2a. Mailing Address <b>3078 CASA RIO COURT</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>08/04/1981</b>	3a. Date of Last Report <b>07/08/1996</b>
21. City & State <b>PAUM BEACH GARDENS FL</b>	22. Zip <b>33418</b>	26. City & State <b>PAUM BEACH GARDENS FL</b>	27. Zip <b>33418</b>	4. FEI Number <b>59-2174817</b>	Applied For <input type="checkbox"/> Not Applicable
23. Country <b>U.S.</b>	24. Country <b>U.S.</b>	28. Country <b>U.S.</b>	29. Country <b>U.S.</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				<b>\$5.00</b> May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent <b>BREXEL, STEPHEN T 824 DOGWOOD RD NORTH PALM BEACH FL 33408</b>		10. Name and Address of New Registered Agent 81. Name <b>STEPHEN BREXEL</b> 82. Street Address (P.O. Box Number is Not Acceptable) <b>3078 CASA RIO COURT</b> 83. City <b>PAUM BEACH GARDENS FL</b> 84. Zip Code <b>33418</b>	
11. Pursuant to the provisions of Sections 607.0509 and 607.7506, 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:  <b>STEPHEN T. BREXEL</b> 2/18/97 Signature, typed or printed name of registered agent and fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE			

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PS</b>	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>BREXEL, STEPHEN T</b>		1.2 NAME	
STREET ADDRESS <b>824 DOGWOOD RD</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>NORTH PALM BEACH FL</b>		1.4 CITY-ST-ZIP	
TITLE <b>V</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KENNEDY, CAROL</b>		2.2 NAME	
STREET ADDRESS <b>4 CAT HOLLOW DR.</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>BAYVILLE NY 11709</b>		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:  **STEPHEN T. BREXEL** 2/18/97 (661)881-0892  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)