

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90202 040 \*\*\*\*70.00

**DOCUMENT # 745078**

1. Entity Name

BRACE, INC.



Principal Place of Business

554 S.W. 7TH ST  
FLORIDA CITY FL 33034

Mailing Address

554 S.W. 7TH ST  
FLORIDA CITY FL 33034

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1882784

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEAN, GEORGE C.  
554 S.W. 7TH STREET  
FLORIDA CITY FL 33034

Name

Ivan Perez

Street Address (P.O. Box Number is Not Acceptable)

12530 S.W. 22 Terr

City

Miami

FL

Zip Code

33175

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Ivan Perez

(NOTE: Registered Agent signature required when reinstating)

2-21-05

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME DEAN, IVY  
STREET ADDRESS 554 S.W. 7 ST.  
CITY-ST-ZIP FLORIDA CITY FL

TITLE VD ☐ Delete  
NAME DEAN, CANDY A.  
STREET ADDRESS 12530 SW 22 TERR  
CITY-ST-ZIP MIAMI FL 33175

TITLE STD ☒ Delete  
NAME PEREZ, IVAN  
STREET ADDRESS 12530 SW 2 TERRACE  
CITY-ST-ZIP MIAMI FL 33175

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME ALAN H. DEAN STD  
STREET ADDRESS 529 NETTLES BLVD  
CITY-ST-ZIP Jensen Beach, FL 34947

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 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 617, 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: Ivy Dean Ivy Dean

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEBRUARY 21<sup>st</sup> 05-305-247-6178

Date

Daytime Phone #