2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUI 1. Entity Name BRASS &		Mar 09, 2004 08:00 AM Secretary of State							
Principal Place	of Rusiness	Mailing Address			1				
Principal Place of Business 3306 BORICH STREET DALLAS TX 75210		3306 BORICH STREET DALLAS TX 75210							
				ي.				2000 JOHN 2000 A	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt #, etc.		Suite, Apt. #. etc.				MOORE	CR2E034	(11/03)	rah,
City & State		City & State		4. F	El Number 75-224089	7		pplied For It Applicable	
Zıp	Country	Zip Cour		try	5. C	ertificate of Status Desired		\$8.75 Add	
	<u> </u>		7, N	ame and Address of New F	Registered				
				Name					4 4
MCCANN, JOHN 5850 MASTERS BLVD.				Street Address (P.O. Box Number is Not Acceptable)					
ORL	ANDO FL 32819								
				City			FL	Zip Cod	e
	named entity submits this statement	for the purpose of changing it	s register	ed office or registe	ered age	ent, or both, in the State of F	iorida. 1 am	familiar with,	and accept
the obligations of registered agent. SIGNATURE Signature typed or profiled name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE									
	ILE NOW!!! FEE IS \$150.00	, , , , , , , , , , , , , , , , , , ,					·	·	<u> </u>
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Fiorida Department of State						 Election Campaign Finant Fund Contribution 		\$5.0 □ Added	O May Be to Fees
10.	OFFICERS AN	D DIRECTORS	11.		AD	DITIONS/CHANGES TO OF	FICERS AN	DDIRECTOR	S IN 11
TITLE NAME	CD FRANKLIN, KEN	☐ Defete	TITE NAM					Change	☐ Addition
STREET ADDRESS	3306 BORICH STREET			EET ADDRESS					
CITY -ST - ZIP	DALLAS TX 75210			(+ST-ZIP					
TITLE NAME	DOHNS, KIM	☐ Delete	ITIT AAM					☐ Change	Addition
STREET ADDRESS	3306 BORICH STREET		STR	EET ADDRESS		1)000000 9-03/09/04		112 150	an
CITY-ST-ZIP	DALLAS TX 75210	₹ Delta	TITL	(-S1-ZIP		00,00,01		Change	☐ Addition
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NAME		- Januar	NAM	AE					_
STREET ADDRESS CITY-S1-ZIP				EET ADDRESS (-ST-ZIP					
TITLE	<u> </u>	☐ Delete	TITI	E .				☐ Change	☐ Addition
NAME			NAN TT2	AE EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				(-\$1-ZIP					ينب .
TITLE		☐ Delete	TiTI	1				☐ Change	Addition
NAME STREET ADDRESS			NAM STR	ME EET ADDRESS					
CITY-ST-ZIP			CIT	Y-ST-ZIP		15.5 F	<u> </u>		<u> </u>
indicated of the cor	certify that the information supplied with an this report or supplemental report operation or the receiver or trustee en lor on an attachment with an addres	t is true and accurate and that npowered to execute this repo	t my sign: irt as requ	ature shall have th	e same i	legal effect as it made under	r oath: that '	l am an office	r or difector

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