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

Mailing Address

126 N. OCEAN BLVD

2a. Mailing Address

DELRAY BEACH FL 33483

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

2. Principal Place of Business

126 N. OCEAN BLVD **DELRAY BEACH FL 33483**



FLORIDA DEPARTMENT OF STATE

FILED

Feb 19, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

·11/25/1980

4, 'FEI Number

02-19-1999 90019 027 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F07111

BERKSHIRE HOLDING CORP.

59-2053053 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired \Box Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes the current year Intangible □No 24 30 Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent NOISEUX, ANDRE Street Address (P.O. Box Number is Not Acceptable) 126 N. OCEAN BLVD **DELRAY BCH FL 33444** 83 84 City 85 Zip Code 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 accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE ☐ Change 1.1 TITLE TITLE NOISEUX, ANDRE 1.2 NAME NAME 126 N. OCEAN BLVD 1.3 STREET ADDRESS STREET ADDRESS DELRAY BCH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 2.1 TITLE TITLE NAME NOISEUX, JOANE 2.2 NAME STREET ADDRESS 126 N. OCEAN BLVD 2.3 STREET ADDRESS DELRAY BCH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 3 1 TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME

14. 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 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 of guistee 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 th an address, with all other like empowered

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

561-292-5045

☐ Change

□ Addition