FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 24 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F09262 (9)

1. Corporation Name

BREVARD-FLORIDA PROPERTIES, INC.

Principal Place of Business	Mailing Address
C/O ROBERT STONE,SR. 3750 N.W. 87TH AVENUE SUITE 500 MIAMI FL 33178	C/O ROBERT STONE,SR. 3750 N.W. 87TH AVENUE SUITE 500 MIAMI FL 33178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/16/1980
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business	2a. Mailing Address
21 6285 Old Medinah Circle	26 6285 Old Medinah Circle
Suite, Apt. #, etc. 22 c/o Westbrook	Suite, Apt. #, etc. 27 c/o Westbrook
City & State 23 Lakeworth, FLA	City & State 28 Lakeworth, FLA.
Zip 24 33467 Country 25 USA	Zip 29 33467 Country 30 USA

4. FEI Number: 59-2582069 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STONE,ROBERT SR.,
3750 N.W. 87TH AVENUE SUITE 500
MIAMI FL 33178

10. Name and Address of New Registered Agent

81 Name: Stone Robert Sr.
82 Street Address (P.O. Box Number is Not Acceptable): 6285 Old Medinah Circle
83
84 City: Lakeworth FL 85 Zip Code: 33467

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] Apr 17, 1995
Signature, typed or printed name of registered agent and title if applicable — DATE (Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	WEHMEYER,HORST	1.2 NAME	
STREET ADDRESS	ELGINGER WEG 20	1.3 STREET ADDRESS	
CITY ST ZIP	4 DUSSELDORF 80 W.G.	1.4 CITY ST ZIP	
TITLE	D	2.1 TITLE	☒ Change ☐ Addition
NAME	STONE, ROBERT SR	2.2 NAME	
STREET ADDRESS	SUITE 500, 3750 N.W. 87TH AVE.	2.3 STREET ADDRESS	6285 Old Medinah Circle
CITY ST ZIP	MIAMI FL 33178	2.4 CITY ST ZIP	Lake Worth, FLA 33467
TITLE	SD	3.1 TITLE	☐ Change ☐ Addition
NAME	WOLLNY,RAINER M.	3.2 NAME	
STREET ADDRESS	UNTERSTAAT 45	3.3 STREET ADDRESS	
CITY ST ZIP	WEST GERMANY	3.4 CITY ST ZIP	
TITLE	TD	4.1 TITLE	☐ Change ☐ Addition
NAME	SCHAGEN,FRITZ	4.2 NAME	
STREET ADDRESS	WASSERWERKSWEG 14A	4.3 STREET ADDRESS	
CITY ST ZIP	WITTALAER,W.GERMANY	4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: [signature] Apr 17, 1995 (407) 434-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Robert Stone Sr. Director

0196014 CP