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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # FOO

FILED Jan 27 1998 8:00am Secretary of State

1. Corporation Name						
Breva	rd-florida properties.	INC.				
					# 1881/18 #111 B#118 #1110 B#118	AN 2000 ANN ANN ANN ANN ANN AN ANN AN
Origanal Diag	a of Dusinson	Molling Address				<u> </u>
Principal Place of Business Mailing Address						
6285 OLD MEDINAH CIRCLE 6285 OLD MEDINAH CIRCLE C/O WESTBROOKE C/O WESTBROOKE			ICLE			
LAKE WORTH		LAKE WORTH FL 33467		DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualified	
<u> </u>					12/16/1980	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2582069	Not Applicable \$8.75 Additional	
22	.,	27		5. Certificate of Status Desired	Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution		
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid to	
24	25				Personal Property Tax due June 30.	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Regis	lered Agent
STONE, ROBERT SR.,				Name		
	B5 OLD MEDINAH CIRCLE		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
LAI	KE WORTH FL 33467		83			
	ng t		84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.				I e-named co	orporation submits this statement for the purp	
office or r	egistered agent, or both, in the State in familiar with and accept the obligation	of Florida, Such change was dions of Section 607,0505, Ft	authorized by lorida Statute:	y the corpo s	ration's board of directors. I hereby accept th	ne appointment as registered
SIGNATURE	The state of the s	month of, obelien correctly (onea ciaidio	0.		
SIGNATURE	Signature, typed or printed same of registered agen	nt and title if applicable (NO	TL: Rog stered Age	ent signature re		DAIL
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	WEHMEYER HORST ELGINGER WEG 20		1.2 NAME	ADDOCOD		
STREET ADDRESS	4 DUSSELDORF 80 W.G.		1.3 STREET	1		
CITY-ST-ZIP TITLE	D	☐ DELETE	1.4 CHY-5 2.1 TiTLE	SI-ZIF		Change Addition
NAME			22 NAME			
STREET ADDRESS	6285 OLD MEDINAH CIRCLE		2 3 STREET	ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL		2. 4 CITY-			
TITLE			31 TITLE			☐ Change ☐ Addition
NAME	WOLLNY, RAINER M.					
STREET ADDRESS	UNTERSTAAT 45		3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY -	ST-ZIP		
TITLE	1=		4.1 TITLE			Change Addition
NAME	SCHAGEN, FRITZ	4.2				
STREET ADDRESS	***************************************		4.3 STREE1	ADDRESS		
CITY-ST-ZIP	WITTALAER, W.GERMANY	T DESERTE	4.4 CITY - S	ST-ZIP		Change Liddian
TITLE		DELETE 5.1				Change Addition
NAME OTOTET ADDDESS			5.2 NAME	ADDDESS		
STREET ADORESS			5.3 STREET			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	11 - ZIP		Change Addition
NAME		_ beech	6.2 NAME			
STREET ADORESS			6.3 STREET	ADDRESS		
	CITY-ST-ZIP		6.4 CITY- S			
	and it that the information as undied with	th this filing does not publish t			in Section 110 07/3Vi), Florida Statutos, Litural	har certify that the information

eby certify that the information supplied with this filing does not quality for the exemption stated in Section 1 ±0.07(3)(1), Florida Statutes. I furner certify that the informationated in this annual report is supplierential 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 error of the corporation or the receiver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in