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 1. Corporation Name	# F10 3	398	(8)
BRANTEX, INC.			
Analel vane	143/97	Kool PA	K. Ive

Principal Place of Business 2750 N 29TH AVE #118

NAME

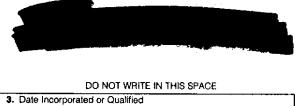
TITLE

STREET ADDRESS

CITY-ST-ZIP

Mailing Address 2750 N 29TH AVE

FILED Feb 19 1998 8:00am Secretary of State



HOLLYWOOD FL 33020 US		į	HOLLYWOOD FL 33020 US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 11/14/1980			
2.	Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For			
1		26				59-2038915	Not Applicable		
Suite, Apt. #, etc.		27	Suite, Apt #, etc.			5. Certificate of Status Desired See Regularity			
City & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution	scing \$5.00 May Be Added to Fees		
•	Zip Country 25	29	Zip Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
7777 GI ANES BOAN			81	Name					
			82 Street Address (P.O. Box Number is Not Acceptable)						
BOCA RATON FL 33434		63							
			84	City	FL	35 Zip Code			
11.	1. 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, 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 requ	ired when reinstating)	DATE		
12.	OFFICERS AND DIREC	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DP	DELETE	1.1 TITLE		Change	☐ Addition	
NAME	ZINGLER, MARC		1.2 NAME				
STREET ADDRESS	2750 N. 29 AVE #118		1.3 STREET ADDRESS			[
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP			Ì	
TITLE	डा	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition	
NAME	HATCH-ZINGLER, LAURIE		2.2 NAME				
STREET ADDRESS	2750 N. 29 AVE. #118		2.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY - ST - ZIP				
TITLE		DELETE	3.1 TITLE	-	☐ Change	☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TOTLE		☐ Change	☐ Addition	

4. 2 NAME

5.1 TITLE

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

Change 900002436099 -02/20/98--01014--027 *****150.00**

Addition

Addition

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 temporal 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 appropriate with an address.

DELETE