FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(3)

DOCUMENT # 1. Corporation Name

BROTHERS "F" CORPORATION

Principal	Place of B	usiness
0.00	GEDUADO	CHENUTIU

SIGNATURE:

C/O GERHARD FRIEDHEIM

Mailing Address

P.O. BOX 546781



9480 HARDING AVE SURFSIDE FL 33154-2877		SURFSIDE FL 33154-0781				
0 00000000	A. 40.4			3. Date Incorporated or Qualified 01/15/1981	3a. Date of L 05/0	ast Report)1/1995
	ROMARD IN 116	Mar DO Stress	6181	4. FEI Number 59-2058058		Applied For
Suite. Apt. #	, etc.	Suite, Apt. #, etc.	V 1 0 1			Not Applicable
2	V	27	_	5. Certificate of Status Desired		B.75 Additional Fee Required
3 5 State	RESIDE FL	28 SUPT &	SINETL	Election Campaign Financing Trust Fund Contribution	\$	5.00 May Be Added to Fees
331	Yountry S A	29331J4	30 USTYS A	8. This corporation has liability for in Florida Statutes Yes	ntangible tax und	
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Currer	it Registered Agent		10. Name and Address of New R	egistered Agen	i
EDIEN	IEIM GEDHADD		81 Name			
FRIEDHEIM, GERHARD 9480 HARDING AVE		B2 Street Addre	B2 Street Address (P.O. Box Number is Not Acceptable)			
SURFS			83	00		
			93			
			84 City	M	E 85	Zip Code
1. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutr	es, the above-named corners	ation submits this statement for the purp	TL	ito roolotarad affi
or registere familiar with	d agent, or both, in the State of Floric , and accept the obligations of, Secti	ia. Such change was authorize on 607,0505. Florida Statutes	ed by the corporation's board	ation submits this statement for the purp d of directors. I hereby accept the appo	intrnent as regisf	. ns registered опісе .ered agent, I am
IGNATURE	, 2		•			
	ignature, typed or pricted name of registered agent		TE: Registered Agent signature required	wher reinstaling)	DATE	
<u>. </u>	DV OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRE	CTORS IN 12
.E VE	FRIEDHEIM, GUNTHER	DELETE	1. 1 TITLE		☐ Cha	nge 🔲 Addition
	9480 HARDING AVE		1,2 NAME			•
Y-ST-ZIP	SURFSIDE,FL 00000		1.3 STREET ADDRESS			
F	DP	DELETE	1.4 CHY- ST- ZIP			
TE	FRIEDHEIM, GERHARD		2 1 TITLE		Chai	nge 🔲 Addition
EET ADORESS	9480 HARDING AVE		2 2 NAME			
r-ST-2#P	SURFSIDE,FL 00000		2.3 STREET ADDRESS			
E	SOT	DELETE	2.4 CITY-ST-ZIF 3. 1 TITLE	- 5,	Char	an Madition
ie l	FRIEDHEIM, RUTH	-	3.2 NAME		GIRI	nge 🔲 Addition
EET ADDRESS	9480 HARDING AVE		3.3 STREET ADDRESS			
-S1-7IP	SURFSIDE, FL 00000		34 CITY-ST-ZIP			
E	VD	DELETE	4 1 TOTLE		[] Char	nge
E	FRIEDHEIM, INGE		4.2 NAME		••••	a Comment
EET ADDRESS	9480 HARDING AVE		4.3 STREET ADDRESS			
- S1- 7IP	SURFSIDE, FL 00000		4.4 C(1Y - S) - Z(P			
F		DELETE	5. 1 TALE		Chan	ige 🔲 Addition
E			5 2 NAME			
EET ADDRESS			5.3 STREET ADDRESS			
- \$1- ZIP		() NIETE	5.4 CITY - ST - ZIP			
1		DELETE	6. 1 TATLE		Chan	ge 🔲 Addition
E ADDOCCE			6.2 NAME			
EET ADDRESS			63 STREFT ADDRESS			
r-ST-ZIP I do hereby c	certify that the information supplied with	th this filling is valuntarily funda	6 4 C/TY-ST-ZIP	Abo a constitution of the		
L do horobus	m an office of director of the corpora	ith this filing is voluntarily furnis il roport or supplemental annua dion or the receiver or trustee an attachment with an addres	thed and does not qualify for al report is true and accurate empowered to execute this	the exemption stated in Section 119.07 and that my signature shall have the sa eport as required by Chapter 607, Flori	'(3)(k), Fiorida Sta me legal effect a da Statutes; and	atutes. I further is if made under that my name