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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F6229

(2)

1. Corporation BRAVI (CORPORATION	(2)		L IODIYAD UMB AMYA YYDYA YIRIA MAYA AMAY AMAY AMAY AMAY AMAY AMAY AM
Principal Place	e of Business	Mailing Address		
13006 SW 133RD COURT MIAMI FL 33186-5855		13006 SW 133RD COUR MIAMI FL 33186-5855	ī	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
A 5		1 A		02/12/1982
2. Principal Place of Business 21		2a. Mailing Address		4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		SS 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Ζιρ 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curre]30]	10. Name and Address of New Registered Agent
KOI	LBER, CLIFFORD M		81 Name	COLBER, CLIFFORD M.
(108	NW 27 AVE 4580 - DE	LETE	82 Street Addr	ress (P.O. Box Number is Not Acceptable)
7001 S.W. 97TH AVE., STE 210			700	1 S.W. 971 AVE , SUITE 210
MIA	MI FL 33173		63	,
			84 City Oo	85 Zip Code
44 0		20 1 007 1500 50 14 50 1		14//1/ FL 33/73
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized by the corporat	poration submits this statement for the purpose of changing its registered lion's board of directors. I hereby accept the appointment as registered
•	m familiar with, and accept the oblig	ations of, Section 607.0505, FI	orida Statutes.	
SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable (NO	E Registered Agent signature requir	red whon reinstating) OATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☑ Addition
NAME	BRACHE, JOSÉ A		1.2 NAME	
STREET ADDRESS	13006 SW 133RD COURT MIAMI, FL 20060 3318	1-5055	1.3 STREET ADDRESS	33/86-5853
CITY-ST-ZIP TITLE	MIAMI, FL BOOOD _5310	DELETE □ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			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		☐ DELETE	3.4. City-St-ZiP	Change Addition
TITLE NAME			4.1 TITLE 4.2 NAME	Change Addition
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	•		4.4 CITY-ST-ZIP	
TITLE	<u> </u>	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		Drive	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME CTREET ANDRESS			6.2 NAME	
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 City-St-Zip	
14. I hereby o	ertify that the information supplied v	vith this filing does not qualify f	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of officer or of	on this annual report or supplement	al annual report is true and acceiver or trustee empowered to	curate and that my signatur	re shall have the same legal effect as if made under cath; that I am an uired by Chapter 607, Florida Statutes; and that my name appears in