

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90032 048 ***158.75

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DO NOT WRITE IN THIS SPACE

DOCUMENT # F74019

1. Entity Name
BRAMAN COLORADO EUROPEAN IMPORTS, INC.

Principal Place of Business 9201 WEST COLFAX DENVER CO 80215 US	Mailing Address 2060 BISCAYNE BLVD 2ND FL MIAMI FL 33137-5024 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number 59-1968512	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
KRIEGER, STANLEY J.
2060 BISCAYNE BLVD
2ND FL
MIAMI FL 33137

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing : Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	☐ Delete	TITLE	☐ Change	☐ Addition
STREET ADDRESS	PCD		NAME		
CITY-ST-ZIP	BRAMAN, NORMAN		STREET ADDRESS		
	2060 BISCAYNE BLVD, 2ND FL		CITY-ST-ZIP		
	MIAMI FL 33137-5024				
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	ADIS, DONALD		NAME		
STREET ADDRESS	2060 BISCAYNE BLVD, 2ND FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33137-5024		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KRIEGER, STANLEY J		NAME		
STREET ADDRESS	2060 BISCAYNE BLVD, 2ND FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33137-5024		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	BERNSTEIN, ROBERT		NAME		
STREET ADDRESS	2060 BISCAYNE BLVD, 2ND FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33137-5024		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Stanley J. Krieger* **STANLEY J. KRIEGER, Secy** **4/3/00** **305-576-1889**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)