

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F90103

(5)

1. Corporation Name

BRIAN'S SHELL SERVICE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 10 PM 12:50

Principal Place of Business

1800 N. PINE ISLAND RD.
PLANTATION FL 33322
US

Mailing Address

1800 N. PINE ISLAND RD.
PLANTATION FL 33322
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/09/1982

3a. Date of Last Report

02/23/1994

4. FEI Number

65-0175444

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 10193 CLEARY BLVD.

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 PLANTATION FL.

City & State

28

Zip

24 33324

Country

25 FLORIDA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

MOODY, STEVE E.
MOODY & JONES
3661 W. OAKLAND PARK BLVD.
FT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, by hand or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	ST
NAME	SADOWSKI, JUDITH W
STREET ADDRESS	7384 S.W. 9TH COURT
CITY-ST-ZIP	PLANTATION FL
TITLE	PD
NAME	SADOWSKI, PAUL J
STREET ADDRESS	7384 SW 9TH ST
CITY-ST-ZIP	PLANTATION, FL 00000
TITLE	VD
NAME	SADOWSKI, SCOTT
STREET ADDRESS	7384 S.W. 9TH COURT
CITY-ST-ZIP	PLANTATION FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SCOTT SADOWSKI V.P.

Date

2/6/95

Signature #

305 424 02 30