FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000000811

1. Corporation Name

ROBERT J. BRINKER INVESTMENT ADVISOR SERVICE COR

P.										
Principal Plac	e of Business	Mailing A	Address					UII) BUI) UEII 1	384B) I	1801 1101 1891
1980 N. ATLAN	ITIC AVE.	2023 N. A	2023 N. ATLANTIC AVE.							
SUITE 426			SUITE 301				DO NOT WRITE IN THIS SPACE			
			OCOA BEACH FL 32931				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
US		US					02/03/1993			
2 Oringinal P	lace of Business	2a. Mailir	ng Address				4. FEI Number		Apr	olied For
─	lace of Busiliess	26	ng Address				22-2421416			Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.				_	¬ \$	8.75 A	
22		27					5. Certificate of Status Desired		Fee Rec	quired
City & Stat	re		City & State				6. Election Campaign Financing	7	\$5.00	May Be
23		28	28				Trust Fund Contribution	<u> </u>	Added to	Fees
Zip	Country	Zip		Country	у		8. This corporation owes the current	year Intangi	ble	
24	25	29		30			Personal Property Tax.			□No
	9. Name and Address of Curr	ent Registered	Agent				10. Name and Address of New Reg	istered Age	nt	
				81	1 N	ame				
	NKER, ROBERT			82	2 5	treet Addre	ess (P.O. Box Number is Not Acceptable	-)		
	O N. ATLANTIC AVE.		İ							
STE 426										
COC	COA BEACH FL 32931			84	4 C	itv	<u> </u>	8	5 Zip C	ode
					1	•	pration submits this statement for the pur	FL		
SIGNATURE	m familiar with, and accept the obli					nature required	when reinstating)	OATE		
12.	OFFICERS .	AND DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	DC		☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	Brinker, Robert J			1.2 NAME						ļ
STREET ADDRESS		01		1.3 STREE	ET ADD	RESS	•			ł
CITY-ST-ZIP	COCOA BEACH FL			1.4 CITY-		•			0	- Addison
TITLE			☐ DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREE	ET ADO	RESS				
CITY-9T-ZIP			~-	2.4 CITY-					Observe	
TITLE			☐ DELETE	3.1 TITLE			1		Change	☐ Addition
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	ET ADD	RESS				
CITY-ST-ZIP			- DELETE	3.4. C/TY-		,			Change	Addition
TITLE			☐ DELETE	4.1 TITLE					Change	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE						}
CITY-ST-ZIP			Document	4.4 CITY-5		·		·	Change	Addition
TITLE			☐ DELETÉ	5.1 TITLE					Change	L. Modificia
NAME	1			5.2 NAME		NDE CE				ļ
STREET ADDRESS				5.3 STREE		i				ţ
CITY-ST-ZIP			☐ DELETE	5.4 CITY-: 6.1 TITLE					Change	Addition
TITLE			L J UELE IE	6.2 NAME		1			rungo	
NAME						DECC				
STREET ADDRESS	i			6.3 STREE		incoo				

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

ROBERT J. BRINKER