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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #**1. Corporation Name F9300001028 (0)

**BRF CORPORATION OF MASSACHUSETTS** 

Mailing Address Principal Place of Business 470 ATLANTIC AVENUE 470 ATLANTIC AVENUE BOSTON MA 02210 BOSTON MA 02210

**FILED** Feb 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualified				
2. Principal F	Place of Business	2a. Mailing Address				02/24/1993 4. FEI Number		1 1	Land E	
21	Tade of Fidalitess	· · · · · · · · · · · · · · · · · · ·						Applied For		
Suite, Apt	# atc	Suite. Apt. #, etc.			04-2985681			ot Applicable		
22		27				5. Certificate of Status Desired	5. Certificate of Status Desired See Required Fee Required			
City & Sta	tc·	City & State				6. Election Campaign Financing \$5.00 May Be				
23	<del></del>	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Coun	try		8. This corporation owes or has paid the	current	year Ir	ntangible	
24	25	29	30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Currer	t Registered Agent				10. Name and Address of New Register	ed Ager	nt		
THE PRENTICE-HALL CORPORATION SYSTEM INC.				81 Name						
12	201 HAYS STREET		82 Street Add			dress (P.O. Box Number is Not Acceptable)				
St	JITE 105		`	7	Oli Coli Alai	aross (1.0. box Humber is Not Acceptable)				
	ALLAHASSEE FL 32301		8	33						
]			-	34	City		85	- T 7in	Code	
L							-L			
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508, Florida Statuti	es, the abo	ove	named co	propriation submits this statement for the purpose ation's board of directors. I hereby accept the	e of char	nging	its registered	
agent. La	registered agent, or both, in the state arn familiar with, and accept the obligi	itions of, Section 607.0505, Flo	orida Statu	DУ 105.	the corpora	ation's board or directors. I hereby accept the	appointn	nent a	s registered	
SIGNATURE	Signaturo, typod or postero nanse of responsestings					juired when reinstaling) DAT				
12.	OFFICERS AN		13.	- Gen	r alginatore rect	ADDITIONS/CHANGES TO OFFICERS		ECTO	PS IN 12	
TITLE	T D	DELETE	~~~~			ACCITIONO/OTHINGEO TO OTTIOE/IO		Change	Addition	
NAME	KRUPP, DOUGLAS		1.2 NAM		İ			, nango		
STREET ADDRESS	470 ATLANTIC AVENUE		1.3 STREET ADDRESS		rpoproc					
CITY-ST-ZIP	BOSTON MA 02210									
TITLE	D	DELETE		1.4 CITY - ST - ZIP 2.1 TITLE			<del></del>	Change	Addition	
NAME	KRUPP, GEORGE	LI beten	2.2 NAME				<u>, , , , , , , , , , , , , , , , , , , </u>	Manyo	L.J Audition	
STREET ADDRESS	470 ATLANTIC AVENUE									
	BOSTON MA 02210			2 3 STREET ADDRESS						
CITY+ST-ZIP TITLE	D D D D D D D D D D D D D D D D D D D	DEFETE		2 4 CITY - ST - ZIP				0	4.4444	
NAME	PETER DONOVAN		3 1 TITLE				L_1 (	Change	☐ Addition	
1 ' '	470 ATLANTIC AVENUE			3.2 NAME						
STREET ADDRESS	BOSTON MA		1	3 3 STREET ADDRESS						
CITY-ST-ZIP	D DELETE		3.4. CITY		-ZIP					
TITLE	•	<b>PC</b> ) there is		4.1 TITLE		)	<b>X</b> 1	Change	Addition	
NAME	GERBER, LAURENCE		4. 2 NAN			PETER DONOVAN			· I	
STREET ADDRESS	470 ATLANTIC AVENUE		4.3 S1RE	4.3 STREET ADDRES		70 ATLANTIC AVENUE				
CITY-ST-ZIP	BOSTON MA 02210			4 4 City - St - ZiP		OSTON, MA 02210				
TITLE	AT	DELETE		5.1 TITLE		·		Change	☐ Addition	
NAME	UMANZIO, CLAIRE		5.2 NAM	E						
STREET ADDRESS	470 ATLANTIC AVENUE		5.3 STRE	EI A	.DDRESS					
CITY-ST-ZIP	BOSTON MA		5.4 CITY	- \$1-	· ZIP					
TITLE	VP	DELETE	6.1 TITLE	TITLE				Change	☐ Addition	
NAME	HALPERN, RONALD		6.2 NAM	E						
STREET ADDRESS	470 ATLANTIC AVENUE		6.3 STRE	ETA	DDRE\$S					
CITY-ST-ZIP	BOSTON MA 02210		6.4 CITY	-ST-	- ZIP					

14. Thereby 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 is supplientental 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 13 if changely, or on all altachment with an address

SIGNATURE:

Claire F. Umanzio) FEB 2 0 1998