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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DOCUMENT # F9500000510 (6)

BRAEMAR HOLDINGS LTD., COMPANY

## FILED Apr 06 1998 8:00am Secretary of State

BRAEMAR ROLDINGS LTD., COMPANY								
Principal Plac	o of Business	Mailing Address	·			.A. <b></b> A. <b></b>		
11401 BISCAYNE BLVD. 11401 BISCAYNE BLVD. MIAMI FL 33161-3410 MIAMI FL 33161-3410					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated	or Qualified		
					01/31/1995			ĺ
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Ap	plied For
21 26					98-0149761	· <del> ·</del>		t Applicable
Suite, Apt. #, etc.					5. Certificate of Status	Desired	\$8.75	
22     27							Fee Re	
F, '					6. Election Campaign	~ ~	\$5.00	, ,
28 Zip Country Zip			Countr	Trust Fund Contribution  Country  8. This corporation owes or has paid the				o Fees
24			30	Personal Property Tax due June		•		
	9. Name and Address of Current		30		10. Name and Addres			
1 15	/INE, NORMAN		81	Name		<del></del>	<del>-</del>	
11401 BISCAYNE BLVD.				01	(DO B. 1)			
MIAMI FL 33161-3410				Street A	Address (P.O. Box Number is Not Acceptable)			
. MIMMI FL 33 101-34 (U			83	<u> </u>				
• <b>1</b>								
			84	City		F	85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the abov	e-named c	orporation submits this stater	nent for the purpose	of changing its	s registered
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.								
-	The time with and doop the opinga		onda olalok	· ·				
SIGNATURE	Signature, typed or printed name of registered ager	f: Registered Ag	ent signature re	quired when reinstating)	DATE			
12. OFFICERS AND DIRECTORS					ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTOR	
TITLE DJ.M.M. MARGEMENT WINDELETE			1.1 TITLE	7	Avirone O L	nd	Change	Addition
NAME PAPOSULLIVAN, TIMOTHY			1.2 NAME		المنالي عدم موه	AND END	in other	
STREET ADDRESS P.O. BOX 260 N.A.			1.3 STREE	ADDRESS	D- 0 2wills			<b>\</b> [
CITY - ST - ZIP	TURKS & CAICOS ISLANDS		1.4 CITY -	ST-ZIP	10 Box 160	NW.		
TITLE	Avicace Web	DELETE	2.1 TITLE		wales ?	invol 1	<b>∢</b> ∐ Change	Addition
NAME dec. o'sullivan Tumokan				!	•	-	•	
STREET ADDRESS OA CON 260 N. A.			2.3 STREE	T ADDRESS				ĺ
CITY-\$T-ZIP	The Coni	10 901-1	2. 4 CITY	ST-ZIP		<del> </del>		
TITLE ,	D DELETE 3.1		3.1 TITLE				L Change	Addition [
NAME .	TIMOTHY P. O'SULLIVAN, ESQ.		3.2 NAME	ĺ				
STRENDORESS	PO BOX 260, BUTTERFIELD SQ, N/A		/ 7 3.3 STREE	T ADDRESS				
CITY-51-ZIP	PROVIDENCIALES, TURKS & CAICOS 38		o <b>s</b> ∄war	ST-2IP				
TITLE	•	☐ DELETE	4.1 THILE				Change	Addition
NAME (		4.1		- 1				
STREET ADDRESS	l		4.3 STREE	I ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		DELETE 5.1		J			L Change	Addition
NAME			5.2 NAME	ļ	•			
STREET ADDRESS	· 1		ł	ADDRESS				
CITY-ST-ZIP		T Driver	5.4 CITY-1	ST-ZIP				T Tarres
TITLE		[] DELETE	6.1 TITLE	}			Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	ertify that the information eupolise will	th this files does not exclude a	6.4 CITY-		in Pastion 110 07/9/() Flori-	la Statutan I duribas	mortifu 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 16 if changed, or on an attachment with an address.

SIGNATURE:

13/3/63

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