2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCU	MENT # F95000005		<u> </u>)		
1. Entity Name B-R CORP. OF NORTH CAROLINA				副 06	SMAY - 1 PM	1.50	
D-11 0011	II . OF NORTH CAROLINA			<i>S C C C C C C C C C C</i>	on the	4: 56	
			OB WEIT	TAI	Cherant of s LAHASSEE, FL	TATE	
Principal Place	e of Business NAV	Mailing Address 100 BROADWAY		, AL	LAHASSEE, FL	ORIDA	
NEW YORK, I		NEW YORK, NY 10005					
			`		IN ININI NUUT AANN KANT AANN AAN	# 88:8: 	HER II HERI
1	Place of Business	. 11.0					
100 Broadway 555 Pleaso Suite Apt. #, etc.			antuille Ro	04172006	6 (916: 9un est): #9tir 49(1 Est		
Suite 1(a)			S	04172006	Chg-P	CR2E034 (11/05)	
City & State City & State City & State City & State			Hanar II	4. FEI Numb			plied For at Applicable
Zip // (Country Zip			Country	7		\$9.75	
1000	<u> </u>	10510		<u></u>		Fee Required	
	6. Name and Address of Current F	Registered Agent	Name O -	- 0	d Address of New Regis	itered Agent	
	NANCIAL OFFICER	Street Addre	es (P.O. Box Mumb	raston) les is Not Acceptable)	ystom		
200 E. GA	6200 (32314-6200) INES ST	12	00 Sout	h Pine is	Tand Re	sad	
TALLAHA:	SSEE, FL 32399-0000						
			City P	lantati	on	FL Zip Code	333-24
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. I am familiar with, and accept the obligations of registered agent.							
1/h							
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	legistered Agent signature re	quired when reinstating)		<u>' / U & </u> DATE	
		O Floation Compaign	Finnsing	65.00 -			
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	Selection Campaign Trust Fund Contrib		\$5.00 May Be Added to Fees			
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS	CHANGES TO OFFICE	RS AND DIRECTORS	3 IN 11
TITLE	PD	☐ Delete	TITLE			☐ Change	☐ Addition
NAME STREET ADDRESS	KREITZBERG, DOUGLAS W 520 GRADYVILLE ROAD		NAME STREET ADDRESS		700074	82139	17
CITY-ST-ZIP	NEWTOWN SQUARE, PA 19073		CITY-ST-ZIP	09	7187060103		*150.00
TITLE	D WILSON, JOSEPH E JR	Delete	THILE			☐ Change	☐ Addition
NAME STREET ADDRESS	1198 KILLARNEY LANE		NAME STREET ADDRESS				
CITY-ST-ZIP	WEST CHESTER, PA 19382	· ·	CITY-ST-ZIP				
TITLE NAME	Secretary Director Ernests. Weyborr	Delete	TITLE NAME			Change	Addition
STREET ADDRESS	555Pleasqutuille	Rd	STREET ADDRESS				
CITY-ST-ZIP	I Brian Cliff Man	or. 1017-10511	CITY-ST-ZIP				
TITLE NAME	Asst. secretary Namee Oberst 555 Pleasantuille	/ □ Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS	555 Pleasantuille	Rd	STREET ADDRESS				
CITY-ST-ZIP	Briarcliff Hanor,	7	CITY-ST-ZIP				
TITLE NAME	Treasurer Robert Schneider	¹ □ Delete	TITLE NAME			Change	☐ Addition [
STREET ADDRESS	555 Pleasantuille R		STREET ADDRESS				ļ
CITY-ST-ZIP	Briarch & Hanor		CITY-ST-ZIP			C Chanca	Addition
NAME	Passt. Treasurer	/ L. Delete	TITLE NAME			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	555 Pleasantuille	Kd NEIA	STREET ADDRESS CITY-ST-ZIP				ļ
	certify that the information supplied with	r Dy (05/6) this filing does not qualify for t	L	ained in Chapter 11	9, Florida Statutes. I furt	her certify that the in	nformation
indicated of the co	on this report or supplemental report is reportal report is reporation or the receiver or trustee empo	true and accurate and that my wered to execute this report as	signature shall have	the same legal effe	ct as if made under oath	; that I am an officer	or director
	, or on an attachment with an address, w		. ,				
SIGNATURE: WWw Developments of Printed Name Or BIGNING OFFICER OR DIRECTOR Date Dayling Phone 4							
i	SIGNATURE AND TYPED OR P	KIN I ED NAME OF BIGNING OFFICER OR	UINECTOR		/ Date	Daytime Phone #	