

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

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Mar 13 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **G17944** (1)
1. Corporation Name
BRICKO, INC.



Physical Office of Business
**9100 SOUTH DADELAND BLVD
SUITE 1707
MIAMI FL 33158-7819
US**

Mailing Address
**9100 SOUTH DADELAND BLVD
SUITE 1707
MIAMI FL 33158-7817
US**

2. Principal Office of Business

2a. Mailing Address

3. Date incorporated or Qualified **01/07/1983** 3a. Date of Last Report **02/27/1996**

21. Sub. Apt. #, etc.

26. Sub. Apt. #, etc.

4. FEI Number **59-2251653** Applied For Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

23. Zip Country

28. Zip Country

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24. Zip Country

29. Zip Country

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEWIS, WILLIAM C., JR.
9100 SOUTH DADELAND BLVD
SUITE 1707
MIAMI FL 33158**

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 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or principal office, 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 (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1. Title **PD** DELETE
12.2. NAME **SUAREZ, MANUEL ANTONIO**
12.3. STREET ADDRESS **18051 BLATT BLVD #301**
12.4. CITY-STATE-ZIP **FT LAUDERDALE FL**
12.5. Title DELETE
12.6. NAME **SUAREZ, BEATRIZ DE.**
12.7. STREET ADDRESS **18051 BLATT BLVD #301**
12.8. CITY-STATE-ZIP **FT LAUDERDALE FL**
12.9. Title DELETE
12.10. NAME
12.11. STREET ADDRESS
12.12. CITY-STATE-ZIP
12.13. Title DELETE
12.14. NAME
12.15. STREET ADDRESS
12.16. CITY-STATE-ZIP
12.17. Title DELETE
12.18. NAME
12.19. STREET ADDRESS
12.20. CITY-STATE-ZIP

13.1. 11. TITLE Change Addition
13.2. 12. NAME
13.3. 13. STREET ADDRESS
13.4. 14. CITY-STATE-ZIP Change Addition
13.5. 21. TITLE Change Addition
13.6. 22. NAME
13.7. 23. STREET ADDRESS
13.8. 24. CITY-STATE-ZIP
13.9. 31. TITLE Change Addition
13.10. 32. NAME
13.11. 33. STREET ADDRESS
13.12. 34. CITY-STATE-ZIP Change Addition
13.13. 41. TITLE Change Addition
13.14. 42. NAME
13.15. 43. STREET ADDRESS
13.16. 44. CITY-STATE-ZIP
13.17. 51. TITLE Change Addition
13.18. 52. NAME
13.19. 53. STREET ADDRESS
13.20. 54. CITY-STATE-ZIP
13.21. 61. TITLE Change Addition
13.22. 62. NAME
13.23. 63. STREET ADDRESS
13.24. 64. CITY-STATE-ZIP

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 is true and correct 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; that I am a partner 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 but changed. I declare this with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

II/24/97 **301 670 OKKK**

CR2E034 (9/96)