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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G27215

1. Corporation Name

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90144 009 ***150.00

Brothers Development	CORPORATION							
of Business	Mailing Address							114 A1811 B1811 1881
6924 DISTRIBUTION AVE., S. 6924 DISTRIBUTION AV. SO.								
JACKSONVILLE FL 32256 JACKSONVILLE FL 32256					DO NOT WE	TE IN THIS	SDACE	
us US								
					03/10/1983			
ace of Business	2a. Mailing Address	;			4. FEI Number			Applied For
	26				59-2686577			Not Applicable
#, etc.	Suite, Apt. #, etc	O.			5 Certificate of Status Desired			5 Additional
	27				J. Certificate of Global Booking			Required
	City & State				6. Election Campaign Financing	П		May Be
	28							d to Fees
-	⊢		intry		•	ent year int		□No
		30				Pagistared		
9. Name and Address of Curren	t Registered Agent		81	Name	IV. Hame and Address of New I	rogistereo	Ago	
TIE, RICHARD R.					for a CD Co. Day Number in Not Append	*hio\		
			82	Street Add	aress (P.O. Box Number is Not Accept	3010)		
(SONVILLE FL 32256			83					`\
			84	City		FI	85 Zi	p Code
to the provisions of Sections 607.050	2 and 607.1508, Florida	Statutes, the a	bove	e-named cor	poration submits this statement for the		changing	its registered registered
m familiar with and accept the obligat	tions of Section 607.050	was authorized 5. Florida Stati	a by tutes.	the corporat	don's board of directors. Thereby door		intinoni aa	
			_					
Signature, typed or printed name of registered agen	at and title if applicable	(NOTE: Registered	_		red when reinstating)	DATE		
Signature, typed or printed name of registered agen	nt and title if applicable D DIRECTORS	(NOTE: Registered	d Agen			DATE	ND DIREC	TORS IN 12
Signature, typed or printed name of registered agen OFFICERS AN	at and title if applicable	(NOTE: Registered 13. TE 1.1 TF	d Agen		red when reinstating)	DATE		TORS IN 12
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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 truetee 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.

SIGNATURE: /

(404) 262-3227