## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # G45119** 

1. Entity Name

B & R LIGHTING, INC.

Principal Place of Business

4434 N.W. 35TH COURT MIAMI, FL 33142

Mailing Address

4434 N.W. 35TH COURT MIAMI, FL 33142

## **FILED** Apr 28, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04212008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2301715 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KANELIDIS, NICK B 2400 E COMMERCIAL BLVD SUITE 706 FT. LAUDERDALE, FL 33308 DO NOT WRITE IN THIS SPACE

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.

SIGNATURE.

10.

TITI F

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstaling)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

KARRER, RICHARD G. U00000926859 7510 COQUINA DR. ns/2n/n8-80083-007 150.00 N. BAY VLGE., FL 33141

NAME STREET ADORESS CITY-ST-ZIP VST TITLE KARRER, BARBARA A. NAME STREET ADDRESS 7510 COQUINA DR. CITY-ST-7IP N. BAY VLGE., FL 33141 TITLE KARRER, BARBARA A. NAME STREET ADDRESS 7510 COQUINA DR. CITY-ST-ZIP N. BAY VLGE., FL 33141 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 4

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR