FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00				FILED	
			RTMENT OF STATE	Feb 11 1	997 8:00am
	JAL REPORT		<b>B. Mortham</b> ary of State		
	1997	DIVISION OF	CORPORATIONS	Secret	ary of State
DOCU	MENT # H327	11 (4)			
		·· (*/			
BRITTAI	NY BUILDERS, INC.			L AN BENT WAND TANK TABLE SADDE ARDER FOR	MINTE MEMOR NUMER NEMER ALMIE DEMOR
Principal Place of Business Mailing Address 7227 CLINT MOORE ROAD 7227 CLINT MOORE ROAD				L ANXIALI NIKN İSISA ILAIS İMKAS ILANS	MLØFT MIMTA DENAT MLØFF ATMIE BIMTE SAMA
SALES CENTER BOCA RATON FL 33496		SALES CENTER BOCA RATON FL 33496-			
US	FL 33430	US	1402	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal P	Nace of Business	2a. Mailing Address	·····	12/05/1984 4. FEI Number	02/08/1996
21	17 JULY 197 - 187 - 187 - 197 - 198	26		59-2502263	Not Applicable
Suite, Apt.	#, elc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional     Fee Regulred
City & Stat	e	City & State	*************	6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28 Zip	Country	Trust Fund Contribution  B. This corporation has liability for i	Added to Fees
24	25	29	30	Florida Statutes	Yes And Yes
POF	9, Name and Address of Cur PKIN & SHURPIN, P.A.	rrent Registered Agent	81 Name	10, Name and Address of New Re	gistered Agent
2499 GLADES RD STE 114 82 Street Addres				ess (P.O. Box Number is Not Acceptab	le)
BOCA RATON FL 33431					
			84 City	·····	
11 Purcuant	to the runnisions of Sections 607.	0502 and 607 1508 Elorida Stat		poration submits this statement for the p	FL
office or r	registered agent, or both, in the St im familiar with, and accept the ob	tate of Florida. Such change was	authorized by the corporat	ion's board of directors. I hereby accept	the appointment as registered
SIGNATURE	Signature, typed or printed name of registered	1 agent and title if accludable (NC	TE: Registered Agent signature regula	ed when reinstation)	DATE
12.	OFFICERS .	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
MILE NAME	VPD Reitsma, Ronald A.	DELETE	1.1 TITLE 1.2 NAME		Change Addition 5
STREET ADDRESS	7229 CLINT MOORE ROAD		1.3 STREET ADDRESS		EO3
CITY - ST - ZIP TITLE	BOCA RATON FL		1.4 CITY-ST-ZIP		Change Addition
NAME	ANSEL, ESTER		2.1 TITLE 2.2 NAME		
STREET ADDRESS	7227 CLINT MOORE RD.		2 3 STREET ADDRESS		
CITY - ST - ZIP TITLE	BOCA RATON FL		2 4 CITY - ST - ZIP 3 1 TITLE	1, 1,	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	3.4. CITY - ST-ZIP 4.1 TITLE	·····	Change 🔲 Addition
NAME			4 2 NAME		
STREET ADDRESS CITY - ST - ZIP			4 3 STREET ADDRESS 4 4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5 2 NAME		
STREET ACIDRESS CITY - ST - ZIP			5.3 STREET ADDRESS 5.4 CiTY-ST-ZIP		
TITLE	• // · · · · · · · · · · · · · · · · · ·	DELETE	61 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS CITY - S1 - ZIP			6.3 STREET ADDRESS 6.4 CITY - ST- ZIP		
14 I do here	by certify that the information support indicated on this annual report	plied with this filing does not qua or supplementa! annual reporties	lify for the exemption stated	in Section 119.07(3)(i), Florida Statute: my signature shall have the same lega	s. I further certify that the effect as if made under oath: that
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 13 if changed, or on an attractment with an address.					
SIGNAT	1 30	null II Ant	THIS VP.		61-487-0700
GIGINAI					