## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

1. Corporation Name H53663

(1)

BRASS INTERIORS, INC.

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Principal Place of Business Mailing Address					iaa hiil alaih al	ait aidit aidit afbit Albit Edet	
20505 US 19 CLEARWATE	9 #169 ER FL 34624-3007	20505 US 19 #169 CLEARWATER FL 34624-3007					
					3. Date Incorporated or Qualified 04/24/1985		e of Last Report )1/19/1995
Principal Place of Business 21		2a. Mailing Address		4. FEI Number 59-2448384	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip <b>24</b>	7p Country Zip 25 29		Country 30		8. This corporation has liability for intang-ble tax under s=199 032, Florida Statutes  Yes No		
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New	Registered	Agent
	, WILMA C. JS 19 #169		81 82	Name Street Add	liess (P.O. Box Number is Not Accepta	ible)	
	VATER FL 34624-3007		83				
			84	City		FL	85 Zip Code
or register familiar wit	ed agent, or both, in the state of Fig th, and accept the obligations of, Se Signature, typed or printed name of registered ag	orida. Such change was authorization 607.0505, Florida Statutes	ed by the corp 3. OTE Registrated Agen	oration's bo	······································	pointment as	s registered agent. I am
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	LICERS AND	DIRECTORS IN 12
TITLE	PD CHIDTIC WILLIAM C	DELETE	1 1 TITLE			ا	Change Addition
NAME STREET ADDRESS	CURTIS, WILMA C. 2188 CAMPUS DR.		12 NAME	ADDOLOG			
CITY-ST-ZIP	CLEARWATER FL		1.3 STREET 1.4 C(TY-S)				
TITLE	VST						Change Addition
NAME	CURTIS, ROBERT H.		2 1 T-TLE 2 2 NAME	Į		•	
STREET ADDRESS	2188 CAMPUS DR.		2 3 STREET	ADDRESS			
CITY - ST - ZIP	CLEARWATER FL		2 4 CITY - S	- Z(P			
TITLE	D	☐ DETEJE	3 1 TILLE				Change Addition
NAME	CURTIS, ROBERT H.		3 2 NAME				
STREET ADDRESS	2188 CAMPUS DR.		33 STREET	ADDRESS			
C-TY-ST-ZIP	CLEARWATER FL		34 CITY - S	- ZIP			
TITLE		☐ DELETE	4 1 1111.6			Į.	Change Addition
NAME			4.2 NAME				
STREFT ADDRESS			43 STREFT	1			
CITY-ST-ZIP		רדו מפונוג	4.4 C/TY - S1	- 7IF			T. A
TIILE		☐ DELETE	5 1 TillE			L	Change Addition
NAME CIRCLE ADDRESS			5.2 NAME	I DROGGO			
STREET ADDRESS			5 3 STREET	1			
CHTY-ST-ZIP THTLE	, , , , , , , , , , , , , , , , , , , ,	DELETE	5.4 CITY - ST 6. 1 TITLE	-ZIP		r	Channe Addition
NAME		Clottic				L	Change 🔲 Addition
STREET ADDRESS			6.2 NAME	ADDRESS			
CITY-ST-ZIP			63 STREET . 64 CHTY - ST				
OTITE OF LIFE	L		0.4 (11.1.2)	ZIP*			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 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 attachment with an address.

SIGNATURE: MILINA C. CILLES SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/96 813-716-4723

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