

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

FILED

Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # H74240 (3)
1. Corporation Name
FOUR BROTHERS INVESTMENTS, INC.



Principal Place of Business 6000 DYER BLVD. WEST PALM BCH FL 32124-1001 US	Mailing Address 6000 DYER BLVD. WEST PALM BCH FL 32124-1001 US
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/04/1985	4. FEI Number 59-2875200	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
VERTUCCI, MICHAEL
6000 DYER BLVD.
WEST PALM BCH FL 33407

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	1.1 TITLE
NAME	VERTUCCI, GERARD	1.2 NAME
STREET ADDRESS	6000 DYER BLVD.	1.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	1.4 CITY-ST-ZIP
TITLE	STD	2.1 TITLE
NAME	VERTUCCI, MICHAEL	2.2 NAME
STREET ADDRESS	6000 DYER BLVD.	2.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	2.4 CITY-ST-ZIP
TITLE	V	3.1 TITLE
NAME	VERTUCCI, GARY	3.2 NAME
STREET ADDRESS	6000 DYER BLVD.	3.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	3.4 CITY-ST-ZIP
TITLE	V	4.1 TITLE
NAME	VERTUCCI, JAMES	4.2 NAME
STREET ADDRESS	6000 DYER BLVD.	4.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BCH FL	4.4 CITY-ST-ZIP
TITLE		5.1 TITLE
NAME		5.2 NAME
STREET ADDRESS		5.3 STREET ADDRESS
CITY-ST-ZIP		5.4 CITY-ST-ZIP
TITLE		6.1 TITLE
NAME		6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS
CITY-ST-ZIP		6.4 CITY-ST-ZIP

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0312900

CR2E034 (10/97)