2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # H78579 1. Entity Name BRI-ETT, INC. Principal Place of Business Mailing Address 11051 MINNEAPOLIS DR 11051 MINNEAPOLIS DR COOPER CITY FL 33026 COOPER CITY FL 33026 2. Principal Place of Business 3. Mailing Address

FILED Mar 16, 2001 8:00 am Secretary of State

03-16-2001 90015 027 ***150.00



16331	5 NW 18 St	16335 Nu	7 13 S	r		(811 4(8)) 81811	05010 N B\$ 014	(COLDIF SUE)
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRIT	E IN THIS S	PACE	
City & Stat	ske Pines FI	Pinbroke D	hus F	4.	FEI Number 59-2587325	,	<u> </u>	oplied For ot Applicable
33029	S Country	Zip 33028	Country	5.	Certificate of Status Desired		8.75 Add ee Require	
	6. Name and Address of Current R	egistered Agent_		7. 1	Name and Address of New Re	gistered A	gent	
			Name					
KWITKIN, RUSSELL 16335 NW 12 ST				Street Address (P.O. Box Number is Not Acceptable)				
PEM	BROKE PINES FL 33028							
						FL	Zip Cod	e
8. The above	named entity submits this statement for t	the purpose of changing its r	egistered office or	registered ag	gent, or both, in the State of Flor	rida.		
SIGNATURE								
	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE:	Registered Agent signat	ure required when r	einstating)	DATE		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE				00	40.51.11.0			
Tax filing requirement and elects to do so. After MAY 1, 2001 Fee					10. Election Campaign Fina Trust Fund Contribution	~ ~	\$5.0	00 May Be
(See criter	ria on back)	Make Check Payable	e to Departmen	t of State	Trast and Contribution		Addet	1101 663
11.	OFFICERS AND D	IRECTORS	12.	AC	DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
TITLE	PST	☐ Delete	TITLE	PST			☐ Change	Addition
NAME	KWITKIN, RUSSELL		NAME	KDITK	in, Russell 5 Nia 12 St Note Anes, Fl			
STREET ADDRESS	11051 MINNEAPOLIS DR.		STREET ADDRESS	1633	5 MD 12 ST			
CITY-ST-ZIP	COOPER CITY FL		CITY-ST-ZIP	femb	xoke Anes, Fl	33024	9	
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indicated	certify that the information supplied with the on this report or supplemental report is to	nis filing does not qualify for true and accurate and that my	ne exemption stat / signature shall h	ed in Section ave the same	119.07(3)(i), Florida Statutes. I legal effect as if made under or	turther certi ath; that I ar	ty that the ir m an officer	or director

powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if