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

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # H81024



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

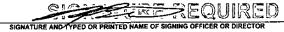
## FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90020 002 \*\*\*150.00

BRECHI	APPRAISALS, INC.									
Principal Place	of Business	Ma	iling Address					- I (BRIBIS BIBL FRED) ITHII ODSID IIDIS BIRI AIREII	91811 B1811 B1811	#:#   <b>#</b>
2061 NW BOCA RATON BLVD 2061 STE 207 #201									20105	
BOCA RATON FL 33431 BOCA RATON FL 33431								DO NOT WRITE IN THIS	SPACE	
US	, <u>.</u>	US						3. Date Incorporated or Qualifed 10/16/1985		
2. Principal Pl	ace of Business	2a.	Mailing Address					4. FEI Number 59-2589301		ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				<u></u>	_5Certificate of Status Desired		Additional equired
City & State			City & State					6. Election Campaign Financing	\$5.00	May Be
	<b>3</b>	28	ony a orace					Trust Fund Contribution		to Fees
Zip	Country	[28]	Zip	Co	untry			8. This corporation owes the current year In	tangible	
24	25	29	•	30				Personal Property Tax.	XX Yes	□No
Z <del>4</del>	9. Name and Address of Curren				T			10. Name and Address of New Registered	Agent	
	·		<u> </u>		81	Name				1
BRECHT, ROBERT L. 2061 NW BOCA RATON BLVD.					82	Street	Addre	ss (P.O. Box Number is Not Acceptable)		
#207										
BOC	A RATON FL 33431				84	City	•	FI	<b>85</b> Zip	Code
affina ar r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid tions of,	la. Such change was a Section 607.0505, Flo	uthorize rida Sta	tutes	the corp	oration	ration submits this statement for the purpose on is board of directors. I hereby accept the appointment of the purpose of its board of directors. I hereby accept the appointment of the purpose of its board of directors.	intment as re	egistered
	Signature, typed or printed name of registered ager					nt signature	required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECT	OPS IN 12
12.	OFFICERS AN	ID DIRE	DELETE	13	MTLE		1	ADDITIONS/CHANGES TO OFFICERS A	Change	
TITLE	DPS DORENT			1	NAME			·		
NAME	BRECHT, ROBERT L.			4		r address		-		:
STREET ADDRESS	2296 N.W. 36TH STREET			- 6						
CITY-ST-ZIP	BOCA RATON FL		☐ DELETE		CITY-S'	1-219	+		Change	☐ Addition
					NAME					ĺ
NAME						ADDRESS				
STREET ADDRESS					слу-я		1	•		-
CITY-ST-ZIP			☐ DELETE 、	_	TITLE				Change	Addition
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CITY-ST-ZIP				3.4.	CITY-S	iT-ZIP				
TITLE			☐ DELETE	4.1	TITLE	•			Change	☐ Addition
NAME				4. 2	NAME					ţ
STREET ADDRESS				4.3	STREET	TADDRESS				
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NAME	•				NAME		.1			1
STREET ADDRESS				- 1		TADDRE\$S	·[			1
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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, with all other like empowered.

SIGNATURE: \_



561-394-6262 Daytime Phone #