PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90158 008 \*\*\*150.00

DOCUMENT	#	H88102
1. Corporation Name		1100102

BRANDYBURGER, INC.

100 mg	<i>,</i>	
Principal Place of Business	Mailing Address	3 (METALL BIRE 1954) (BIRE 1954) (BIRE 1954) BIRE BIRE BIRE BIRE BIRE BIRE BIRE BIRE
9804 MILITARY TRAIL BOYNTON BEACH FL 33436	9804 MILITARY TRAIL BOYNTON BEACH FL 33436	DO NOT WRITE IN THIS SPACE
The sales		3. Date Incorporated or Qualifed 12/02/1985
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For
21	26	59-2639743 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired
City & State	City & State	6. Election Campaign Financing ☐ \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
Zip St Country	Zip Cou	Intry 8. This corporation owes the current year Intangible
24 25	29 30	Personal Property Tax. ☑ Yes ☐ No
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent		<u> </u>
SOLOMON, DENNIS M		81 Name
760 US H'WY 1, SUITE 304		82 Street Address (P.O. Box Number is Not Acceptable)
NORTH PALM BEACH FL 33408		83

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.

84 City

SIGNATURE				***	<b>,</b> ,		
OIOIAN ONE	Signature, typed or printed name of registered agent and title if applicab	le. (NOTE: R	egistered Agent signature r	equired when reinstating)	DATE		
12.	OFFICERS AND DIRECTOR	S	13.	ADDITIONS/CHANGES TO O			
TITLE	PTD	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	BRANDELL, NATHAN		1.2 NAME				* ,
STREET ADDRESS	7076 HUNTINGTON LANE		1.3 STREET ADORESS	-1	• 1		
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP				
TITLE	D . A . A	☐ DELETE	2.1 TITLE	DiRactor - Secretary :	VKE Pres	Change	☐ Addition
NAME	MAGGIN, ARTHUR	,	2.2 NAME		1 (1		
STREET ADDRESS	5801 CAMINO DEL SOL		2.3 STREET ADDRESS		i .:		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	ध्य कि भाग में			
TITLE	DVS	☐ DELETE	3.1 TITLE	DIRECTOR	#	Change	Addition
NAME	BRANDELL, DORIS		3.2 NAME		131		
STREET ADDRESS	7076 HUNTINGTON LANE		3.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL		3.4. CITY-ST-ZIP	# 1			
TITLE	D	□ DELETE	4.1 TTLE			Change	Addition
NAME	Maggin, Marcia H.		4. 2 NAME	3 5 22 1 1 1	- <u>†</u> 14€		
STREET ADDRESS	5801 CAMINO DEL SOL		4.3 STREET ADDRESS		; ;;		
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-ST-ZIP		. 11		
TITLE	1	□ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	A STATE OF THE STA		5.2 NAME		: 11		
STREET ADDRESS			5.3 STREET ADORESS				
CITY-ST-ZIP	(		5.4 CITY-ST-ZIP				
TITLE	in the second	☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	<b> </b>			
STREET ADDRESS	18 4 45 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.3 STREET ADDRESS	·	1.41		
			64 CiTY-ST-ZIP	}	타입하		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BYRELECOURNATION BEANDELL 4/19/99 (21)736-8006

KZEU34 (11/98)