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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J95243

(8)

BRADDOCK INVESTMENT CORP.

FILED
Jan 14 1997 8:00am
Secretary of State



Principal Place of	Business	Mailing Addre	Mailing Address				T CERTIFO BING COMO BINIO FIGUR FIGUR FIGUR FIGUR BIBLI BERGE BINGS BIDIN BIDIN FORCE				
% SYLVAN HOLTZMAN 2601 S. BAYSHORE DR. #600 MIAMI FL 33133		2601 S. BAYSH	% SYLVAN HOLTZMAN 2601 S. BAYSHORE DR., #600 MIAMI FL 33133-5419						t.		
us		U\$	U\$				3. Date Incorporated or Qualified 10/02/1987 3a. Date of Last Report 04/02/1996				
2, Principal Place		2a. Mailing Ad 26					4. FEI Number 65-0122781		_ <del>                                    </del>	pplied For ot Applicable	
Suite, Apt #, et	te.	Suite, Apt.					5. Certificate of Status Desired		•	Additional sequired	
City & State 23		City & State	e			[ '	6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zıp	Country	Zip		Country	/	1	8. This corporation has liability for	intangible	tax under:	s. 199.032,	
24	25	29	30						No No		
	, Name and Address of Cur	rent Registered Agen	<u>t</u>		T		<ol><li>Name and Address of New R</li></ol>	egistered	Agent		
	MAN, SYLVAN			81	Na	ame					
ľ	BAYSHORE DR			82	Str	reet Address	(P.O. Box Number is Not Accepta	ble)	· · ·		
SUITE 6											
MIAMI F	FL 33133			83	ļ						
				84	Cit	ty		FL	<b>85</b> Zip	Code	
agent Lam fa	tered agent, or both, in the St imiliar with, and accept the ob	ate of Florida, Such chi ligations of, Section 60	ange was author 7.0505, Florida :	rized by Statute:	y the s.	corporation's	tion submits this statement for the s board of directors. I hereby acce	purpose o pt the app	f changing pointment as	its registered s registered	
	ative, typed or purifice name of registered				ent sign	nature required wh		DATE			
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFI	CERS AND			
	OLTZMAN, SYLVAN	LJ		I.1 TITLE					L Change	Addition	
	801 S. BAYSHORE DR. #6	200		I.2 NAME		200					
	IAMI FL 33133			I.3 STREET							
TiTLE				.4 CITY - S 2.1 TITLE	51 - ZIF				☐ Change	Addition	
NAME				2 NAME					Orange	L Nooilion	
STREET ADDRESS				.3 STREET	T ANNRI	secc					
CITY-ST-ZP				. 4 CITY-		1					
1ITLE				I.1 TITLE	υ, <u>ε</u>				Change	Addition	
NAME			3	.2 NAME							
STREET ADDRESS			3	3 STREET	r addri	ESS					
CITY-ST-71P			3	1.4. CITY - :	SI - ZIP	,					
THILE				.1 TITLE			771/71/1		Change	Addition	
NAME			4	. 2 NAME							
STREET ADDRESS			4	.3 STREET	roda 1	IESS					
CITY-ST-ZIP				4 CITY - S	ST - ZIP						
TITLE			DELETE 5	1 TITLE					Change	Addition	
NAME			5	2 NAME							
STREET ADDRESS			5	3 STREET	r addri	BESS					
CITY-ST-ZIF				4 CITY-S	ST - ZIP				<del></del>		
TITLE		Ц	DELETE 6	1 TITLE					Change	Addition	
NAME			6	2 NAME							
STREET ADDRESS			6	.3 STREET	( ADDRI	ESS					
CITY-ST-ZIP	celds that the information	6-1-6-11-71	6	4 CITY-S	ST-ZIP		5				

14. I do 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 in funged, or on an attachment with an address.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-97

(305) 857-7780