| FILE | NOW: FILING F | EE AFTE | R MAY 1 I | S \$22 | 25. | 00 | | | | |
|--|---|------------------------------------|--|------------------|--|-----------------------------|--|--------------------------------|---------------------------|---------------------------------|
| P CORF ANNU | PROFIT CORPORATION ANNUAL REPORT 1996 | | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | | STATE | | | | |
| DOCUMENT # J9997 | | 970 | 0 (2) | | | | | | | |
| 1. Corporation | | n INA | ` ' | | | | | | | |
| LIQUID |) assets of Brevar | D, ING | | | | | | | | |
| Principal Place o | of Business | Mali | ng Address | <u></u> | | <u>.</u> | | | | |
| P.O. BOX 372423 SATELLITE BEACH FL 32937-2423 | | | P.O. BOX 372423 Satellite Beach FL 32937-2423 | | | | | | | |
| | | | | | | | Date Incorporated or Qualified 11/02/1987 | | of Last Re)2/13/19 | |
| 2. Principal Plac | ce of Business | 2a. N | Mailing Address | | | | 4. FEI Number | ` | | Applied For |
| # | | 26 | | | | • | 59-2855319 | | | Vot Applicable |
| Saile, Apt. #, [2] | , e tc. | 27 | Suite, Apt. #, etc. | | | <u>.</u> | 5. Certificate of Status Desired | | | Additional Required |
| City & State | | | City & State | | | | Election Campaign Financing Trust Fund Contribution | | | May Be |
| 7(i) Country 25 29 | | | Zip Country | | | | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No 199.032 | | | |
| | 9. Name and Address of Co | errent Registe | red Agent | | 1 | | 10. Name and Address of New | Registered a | Agent | |
| RURGET | TT, STACY L | | | | 81 | Name | | | | |
| 1970 MI | | 82 Street A | | | ddress (P.O. Box Number is Not Acceptable) | | | | | |
| COCOA | 63 | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | 84 | City | | FL | 1 ' | Code |
| or registere | othe provisions of Sections 607, Id agent, or both, in the State of In and accept the obligations of, | rionda Such d | nange was aumonze | eo by the c | ve-n | anied corpo oration's bo | oration submits this statement for the pard of directors. I hereby accept the ap | ourpose of cha pointment as | nging its r registered | egistered office agent. I am |
| SIGNATURE | • | | | | | | | | | |
| 12. | Signal ver typed or printed name of registere | age Land the Pape S AND DIRECTO | | | Agen | signature requir | ed when renstating) | DATE | | |
| liti | PST OFFICERS | S AND DIRECT | JAS DELETE | 13. | TI F | | ADDITIONS/CHANGES TO O | | DIRECTO Change | RS IN 12 |
| NAME | LINDSEY, CHARLES A | | GG PERIOD | 1 2 N/ | | | Burgett, Frederi | _ | | L Audition |
| STREET ADDRESS | 3076 PARK VILLAGE W | AY | | | | ADDRESS | 220 Arthur Avenu | | JI. | |
| COTY ST ZIP | MELBOURNE FL | | | 14 C | | | Cocoa Beach, Fl. | _ | | 1 |
| 10°(f | | | DELETE | 2 1 TI | | | | |] Change | Addition |
| NAME . | | | | 2 2 N | ME | | | | | |
| STREET ADDRESS | | | | 2351 | REEI | ADDRESS | | | | |
| ÇTY SL ZP TILLE | | | ☐ DELETE | 240 | | r - ZIP | | | 7.05 | |
| NAME | | | | 3 1 TI 3 2 N/ | | | | L |] Change | Addition |
| STHEE! ADDRESS | | | | | | ADDRESS | | | | |
| 0018-81-702 | | | | 3 4 C | | | | | | |
| TITLE | *************************************** | | DELFTE | 4 1 T | | | | | Change | Addition |
| NAME | | | | 4 2 N | ME | | | | | |
| STHILL ADDRESS | | | | 4350 | REET | ADDRESS | | | | |
| CITY - SE- 7IP | | | ET no str | 4 4 C | | I - ZIP | | | . | |
| TIPLE NAME | | | DELETE | 5 1 1 | | | | |] Change | ☐ Addition |
| STREET ACORESS | | | | 52 N4 | | ADDRESS | | | | |

14. Libr hereby cert fy that the information supplies with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 certify 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

54 CITY - ST - ZIP

63 STREET ADDRESS

64 CITY - ST-ZIP

6 1 TITLE

62 NAME

DELETE

CHY ST 769

STREET ADDRESS

CHY ST ZIP

Blue

SIGNATURE: Reserved C. Sung J Fred
SIGNATURE and TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Frederick C. Burgett, Jr. 1/18/96 (407) 784/7/6

☐ Change ☐ Addition