Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90159 016 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # K27700

1. Corporation Name

BRUCKN	ier & Bruckner, inc.					ļ					
											/II <b>010</b> 17 <b>010</b> 11 ( <b>00</b> 1
Principal Place	e of Business	Mailing Ac	idress			]					
4992 N PINE ISLAND ROAD 4992 N PINE ISLAND ROAD						Ì					
FT LAUDERDALE FL 33351 FT LAUDERDALE FL 33351								DO NO	T WRITE IN	THIS SPACE	
US		US				F	3 Date	e Incorporated or C		1110 01 7102	}
						ļ		06/1988			
2 Principal P	lace of Business	2a. Mailing	Address					Number		<del></del>	Applied For
21	nado di Badinada	26	,				65-	0060177			Not Applicable
Suite, Apt.	#, etc.		Apt. #, etc.				-		sired	\$8.75	5 Additional
22		27					5. Cer	tifcate of Status De	Siled [	Fee	Required
City & Stat	e	City &	City & State				6. Elec	ction Campaign Fin	ancing	\$5.0	0 May Be
23		28					Trus	st Fund Contribution	ı <u></u>	Adde	ed to Fees
Zip	Country	Zip	_	Country		ļ		corporation owes			No
24	25	29	3	0				sonal Property Tax		☐ Yes	
	9. Name and Address of Curro	ent Registered A	gent	81	Name		10, Nar	ne and Address o	New Registe	erea Agent	
BRU	CKNER, MICTHELL W			"	Name						
	66 NW 21 PL			82	Street /	Address	(P.O. I	Box Number is Not	Acceptable)		ľ
CORAL SPRINGS FL 33071			83				<del></del>				
0011	DE OFFICE OF F			63							
	·			84	City					FL 85 Zi	ip Code
	to the provisions of Sections 607.09	02 607 1509	Florida Statutas	the above	named i	comora	tion sub	mite this statement	for the numo	se of changing	its registered
office or a	registered agent or both in the Stat	anti-Innida Such	i chance was auti	norizea nv	the corno	oration's	board	of directors. I hereb	y accept the a	appointment as	registered
agent. I a	m familiar with, and accept the oblig	gations of, Section	n 607.0505, Florid	la Statutes	•						
SIGNATURE	Signature, typed or printed name of registered a	neet and title if annicable	NOTE R	egistered Ager	nt signature re	equired wh	en reinstal	tina)		TE	
12.		ND DIRECTORS		13.		- 1		ITIONS/CHANGES	TO OFFICER	S AND DIREC	TORS IN 12
TITLE	PD		☐ DELETE	1.1 TITLE						Chang	ge 🔲 Addition
NAME	BRUCKNER, MITCH			1.2 NAME	Į						
STREET ADDRESS	10766 NW 21 PL			1.3 STREE	TADDRESS					•	
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-S	T-ZIP					_	
TITLE	VD		☐ DELETE	2.1 TITLE						Chang	ge 🔲 Addition
NAME	BRUCKNER, GERI			2.2 NAME				,			
STREET ADDRESS	10766 NW 21 PL			2.3 STREET	T ADDRESS						
CITY-ST-ZIP	CORAL SPRINGS FL			2.4 CITY-S	T-ZIP						
TITLE			☐ DELETE	3.1 TITLE						Chang	ge
NAME	i i			3.2 NAME							
STREET ADDRESS				3.3 STREE	T ADDRESS						
CITY-ST-ZIP				3,4, CITY-S	T-ZIP						ELA LEGIS
TITLE			☐ DELETE	4,1 TITLE	1	1				☐ Chang	ge
NAME	·			4, 2 NAME							ĺ
STREET ADDRESS				4.3 STREE	T ADDRESS				•		
CITY-ST-ZIP				4.4 CITY+S	T-ZIP				<u></u>		ge Addition
TITLE			☐ DELETE	5.1 TITLE	Ì			•		Chan	je ∐ Addidon ∫
NAME				5.2 NAME		•				•	
STREET ADDRESS				5.3 STREET							
CITY-ST-ZIP			□ pricte	5.4 CITY-S 6.1 TITLE	1-ZIP	<u> </u>			<u>·</u>	Chang	ge
TITLE	1 101 11		☑ DELETE	1		ľ				· 🗀 Oriani	المقامم المحادث
NAME		- • •	* **	6.2 NAME	TADODECC	-			*		,
STREET ADDRESS	Fig. 10 Page 15			0.3 STREE	TADORESS	i					

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP