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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY - S1 - ZIP

STREET ADDRESS

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COY-\$1-763

CITY - ST - ZIF

CITY - S1 - Z(P

THLE

NAME

TITLE

NAME

TITLE

NAME



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K71856

(4)

BRANTON & ASSOCIATES INC.

Principal Place of Business Mailing Address C/O SIXTO FIGUEROA C/O SIXTO FIGUEROA 4701 S.W. 7TH STREET 4701 S.W. 7TH STREET MIAMI FL 33134 MIAMI FL 33134-1409 3. Date Incorporated or Qualified 3a. Date of Last Report 03/10/1989 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0107950 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zin Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes 🔀 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FIGUEROA, SIXTO 81 Name 4701 S.W. 7TH STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33134** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DPV DELETE TITLE 1.1 TITLE ☐ Change Addition FIGUEROA, SIXTO NAME 1.2 NAME 4701 SW 7TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIF 2. 4 City-ST-ZiP DELETE TITLE Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 eath; 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 sanged, er on an attachment with an address

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

IXTO FIGUEROA (PRESIDENT) SIGNATURE:

(96/6)

Change

Change

Change

Addition

Addition

Addition

FILED

Apr 29 1997 8:00am

Secretary of State