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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 STATE TO THE TOTAL TOTAL

(3)

1. Corporation Name BROWNER DESIGNS, INC.  Principal Place of Business Mailing Address 916 CUNT MOORE RD 916 CUNT MOORE RD										
BOCA RATON	I FL 33487	BOCA HATO	N FL 33487-280	Л			· · · · · · · · · · · · · · · · · · ·		<b></b>	_
l						3. Date Incorporated or Qualified 08/02/1989	J	of Last P 6 <b>/1996</b>	Report	
2. Principal F	face of Business	2a. Mailing A	Address			4. FEI Number		<del></del>	pplied For	1
21			26			65-0199421				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & Sta	te	City & St	ate	·		6. Election Campaign Financing			May Be	┨
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zıp		Country		8, This corporation has liability for	r intangible ta	under s	. 199.032,	1
24	25	29		30				No		
	9. Name and Address of Curre	ent Registered Age	ent	81	Name	10. Name and Address of New R	egistered At	<del>jent</del>		┨
BROWNER, JEFFREY B. 916 CLINT MOORE RD. BOCA RATON FL 33487			82 83	Street	dress (P.O. Box Number is Not Acceptable)				1	
				84	City		FL	<b>85</b> Zip	Code	1
11. Pursuant office or agent. I. SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the oblination to be supported to the control of the					corporation submits this statement for the poration's board of directors. I hereby accu-	purpose of c ept the appoi	hanging i ntment as	ts registered registered	
12.		ND DIRECTORS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.		ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12	13
TITLE	P		DELETE 1.1					Change	Addition	100
NAME	BROWNER, JEFFREY B			1.2 NAME		ĺ <u>.</u>				
STREET ADORESS	8063 MIZNER LANE			1.3 STREET	address	6150 VIA TIERRA				li
CITY-ST ZIP	BOCA RATON FL 33433			1.4 CITY-S	T-ZIP	BOCA RATON, FL. 3	343	3		
THLE		L	DELETE	21 TITLE		·	Ĺ	Change	Addition	ľ
NAME				2.2 NAME						-
STREET ADDRESS				2.3 STREET						1
CHY-S1-ZIP TITLE			DELETE	2. 4 CITY - S 3.1 TITLE	si-ZIP		T	Change	Addition	4
NAMi				3.2 NAME			L	viidinge	- nontroll	
STREET ADORESS				3.3 STREET	4DDRFS\$					1
CITY-ST-ZIF				3.4. CITY - 5						-
TITLE			DELETE	4.1 THTLE	Z- &-11			Change	Addition	1
NAME				4.2 NAME	`	1		-	No. No. of	
STREET ADDRESS				4.3 STREET	ADDRESS	1		•		.]
City S1 - 7IP				4.4 CITY-S						
TITLE			DELETE	5.1 TITLE				Change	Addition	1
NAME				5.2 NAME		1				
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-\$1-7IP				5.4 CITY - S	T - ZIP					
TITLE			DELETE	6.1 TITLE				Change	Addition	٦

6.4 CITY-ST-ZIP

14. I do horeby 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.

6.3 STREET ADDRESS

SIGNATURE:

STHEET ADDRESS

DE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/97 561-997572

Daylimo Phone #