

FILE NOW: Fee after May 1, will be \$263.75

**LIMITED LIABILITY COMPANY
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 JAN 26 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee
\$ 238.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT #L94000000326**

BRICK FORTRESS, L.C.
% ARNOLD LICHTSCHEIN
1205 LINCOLN RD., #216
MIAMI BEACH FL 33139

1a. Principal Place of Business Address

% ARNOLD LICHTSCHEIN
1205 LINCOLN RD., #216
MIAMI BEACH FL 33139

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

2. Mailing Address		2a. Principal Place of Business		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/13/1994	FL
City & State		City & State		4. FEI Number	☐ Applied For ☐ Not Applicable
Zip		Country		5. Date of Last Report	6. Certificate of Status Desired
					\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

FEIG, MARC I
3000 PETERS RD., SECOND FLOOR
PLANTATION FL 33324

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	LICHTSCHEN, ARNOLD	1205 LINCOLN RD., STE. 216	MIAMI BEACH FL

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****238.75 ****238.75

1/26/95
nst

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company, or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with my address.

SIGNATURE:

A. Lichtschein, Mgr. Member

Signature and typed or printed name of officer, partner, or manager

Date

Daytime Phone #