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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L96771

(5)

FILED May 07 1998 8:00am Secretary of State

BRAND	OON CAR SPA, INC.	(0)			: Bah digah dangai bidai bidah 1881
Principal Plac	ee of Business	Mailing Address	····	{	!
9995 ADAMO DR TAMPA FL 33619 US		2205 HICKORY RIDGE DRIVE #PH VALRICO FL 33594-7211		DO NOT WRITE IN THIS SPACE	
		US		3. Date Incorporated or Qualified	-
2. Principal P	Plage of Business	2a. Mailing Address		08/17/1990 4. FEI Number	Applied For
21 220	HILKONY KINK	26		65-0225928	Not Applicable
Suite, Apt.	#, 6 1c."	Suite, Apt. #, etc.		5, Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		6, Election Campaign Financing	\$5.00 May Be
23 V A1	-RICO	28		Trust Fund Contribution	Added to Fees
24 3 35	94 25 U.SA 9, Name and Address of Curren	Zip 29 3 t Registered Agent	Country	This corporation owes or has paid the c Personal Property Tax due June 30. Name and Address of New Registers	Yes No
90	HECHT, NEIL S.	· · · · · · · · · · · · · · · · · · ·	81 Name	10, Harrio and Address of New Hogisters	u Agent
4830 W KENNEDY BLVD #280			82 Street Arri	represent J. Slot	DICIC
SUITE 3140			20	Tops (P.O. Box Number - Nor Acceptable 16	oc Dr
TAI	MPA FL 33609		83		
			84 City		85 Zip Code
11 Purquent	to the provisions of Sections 607 0500	2 and 607-4508 Flori A Statutes	the above pamed corr	FLAICO F	- 53199
11. Pursuant to the provisions of Sections 607,0502 and 607,0508, Flori in Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered at employment the purpose of changing its registered agent. I am familiarly ith any accept the appointment as registered agent. I am familiarly ith any accept the poligations of Section 607,0006, Frida Statutes.					
SIGNATURE	MINU		ick	7/29/91	
SIGNATORE	Storage plants at the of regulared age		Registe: Agent signature requi	red when reinstaling) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D STEPLEN	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME Street address	SKOLNICK, STEPHEN J. 2205 HICKORY RIDGE DR.		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	VALRICO FL		1.4 City-St-Zip		
TITLE	D	☐ DELETE	21 TITLE		Change Addition
NAME	SKOLNICK, MARJORIE L.		2.2 NAME		
STREET ADDRESS	2205 HICKORY RIDGE DR.		23 STREET ADDRESS		
CITY-ST-ZIP	VALRICO FL		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME	•		32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. C(TY-ST-7)P		Change Addition
NAME		E-1 DETENT	4 1 DILE		Change Addition
STREET ADDRESS			4 2 NAME 43 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		J
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is true and accorate 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 changin, or on an attainment with an actives. 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