

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 23 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M 06294**
1. Corporation Name

B & R SERVICE CORP.

Principal Place of Business Mailing Address
**19500 Turnberry Way (PH A-B)
No. Miami Beach, FL 33180**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/9/84	3a. Date of Last Report May 1994
4. FEI Number 59-245535	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Sute, Apt #, etc.	26 Sute, Apt #, etc.
22 City & State	27 City & State
24 Zip	25 Country
28 Zip	29 Country
30	

9. Name and Address of Current Registered Agent
**Michael B. Denberg
19500 Turnberry Way (Apt. 5D)
No. Miami Beach, Fla. 33180**

10. Name and Address of New Registered Agent
81 Name **Philip Reisel**
82 Street Address (P.O. Box Number is Not Acceptable)
19500 Turnberry Way (Apt. PH A-B)
83
84 City **No. Miami Beach** FL 85 Zip Code **33180**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 607.0502, Florida Statutes.

SIGNATURE *Philip Reisel* (Philip Reisel) DATE **5/8/95**

12. OFFICERS AND DIRECTORS

TITLE	Philip Reisel D/P
NAME	Philip Reisel
STREET ADDRESS	19500 Turnberry Way (PH A-B)
CITY ST ZIP	No. Miami Beach, Fla. 33180
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	Paul Abramson D
NAME	Paul Abramson
STREET ADDRESS	19500 Turnberry Way (PH A-B)
CITY ST ZIP	No. Miami Beach, FL 33180
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	
17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	60000 1498276
23 STREET ADDRESS	-05/24/95--01062--017
24 CITY ST ZIP	****225.00 ****225.00
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. 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 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Philip Reisel* DATE: **5/8/95** 305 931 8363