

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Aug 20, 1999 8:00 am**  
**Secretary of State**

08-20-1999 90001 002 \*\*\*550.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # M29503**

1. Corporation Name

**BROTHERS ELECTRONICS OF FLORIDA, INC.**

Principal Place of Business

200 PARK CENTRAL BLVD. SOUTH  
POMPANO BEACH FL 33064

Mailing Address

200 PARK CENTRAL BLVD. SOUTH  
POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1986

4. FEI Number

59-2659078

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.



Yes ☒ No

2. Principal Place of Business

21 22888 Greenvue Terrace  
Suite, Apt. #, etc.

2a. Mailing Address

26 22888 Greenvue Terrace  
Suite, Apt. #, etc.

City & State

23 Boca Raton, FL

Zip

24 33433

Country

25 USA

City & State

28 Boca Raton, FL

Zip

29 33433

Country

30 USA

9. Name and Address of Current Registered Agent

THOROGOOD, THOMAS K  
200 PARK CENTRAL BLVD SOUTH  
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

Frederick J. Thorogood

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

22888 Greenvue Terrace

83

84 City

Boca Raton

FL

85 Zip Code

33433

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 607.0505, Florida Statutes.

SIGNATURE **Frederick J. Thorogood**

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/15/99

12. OFFICERS AND DIRECTORS

TITLE **VD** ☒ DELETE

NAME **THOROGOOD, FREDERICK J.**  
STREET ADDRESS **200 PARK CENTRAL BLVD SOUTH**  
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **PDM** ☒ DELETE

NAME **THOROGOOD, THOMAS K., JR.**  
STREET ADDRESS **200 PARK CENTRAL BLVD SOUTH**  
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VD** ☒ Change ☐ Addition

1.2 NAME **Thorogood, Frederick J.**  
1.3 STREET ADDRESS **22888 Greenvue Terrace**  
1.4 CITY-ST-ZIP **Boca Raton, FL 33433**

2.1 TITLE **PDM** ☒ Change ☐ Addition

2.2 NAME **Arnold, Georgiana M.**  
2.3 STREET ADDRESS **14 Wildflower Trail**  
2.4 CITY-ST-ZIP **Kobbinville, NJ 08691**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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 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.

SIGNATURE: **Frederick J. Thorogood**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JUL 13 1999**

Date

Daytime Phone #

CR2E034 (5/99)

0075214