

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jul 23, 1999 8:00 am
Secretary of State

07-23-1999 90008 024 ****61.25

DOCUMENT # **N95000002511**

1. Corporation Name
BRATBALL, INC.

394/08 - 90008 - 29

Principal Place of Business
638 79TH TERRACE N
SUITE 312
ST. PETERSBURG FL 33702
US

Mailing Address
POST OFFICE BOX 20592
ST. PETERSBURG FL 33742-0592



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3542 66th Street North	26		05/26/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	#502	27		59-3315147	
City & State		City & State		5. Certificate of Status Desired	
23	St Petersburg FL	28		NO \$8.75 Additional Fee Required	
Zip Country		Zip Country		6. Election Campaign Financing	
24	33710 USA	29		Trust Fund Contribution \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
SMITH, VINCENT 638 79TH TERRACE N SUITE 312 ST. PETERSBURG FL 33702				81 Name Vincent Smith	
				82 Street Address (P.O. Box Number is Not Acceptable) 3542 66th Street North, #502	
				83	
				84 City St Petersburg FL 85 Zip Code 33710	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.					
SIGNATURE Vincent Smith, Director 7/6/99 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
12. OFFICERS AND DIRECTORS					
TITLE	D	DELETED			
NAME	SMITH, VINCENT				
STREET ADDRESS	6502 19TH WAY N				
CITY-ST-ZIP	ST. PETERSBURG FL				
TITLE	D	DELETED			
NAME	GOOD, MARIA				
STREET ADDRESS	5728 CALAIS BLVD #3				
CITY-ST-ZIP	ST. PETERSBURG FL				
TITLE	D	DELETED			
NAME	ACCETTA, DAWN				
STREET ADDRESS	2931 DARTMOUTH AVENUE N				
CITY-ST-ZIP	ST. PETERSBURG FL				
TITLE	D	DELETED			
NAME	DAVIES, CHERYL				
STREET ADDRESS	7148 LOCUST STREET NE				
CITY-ST-ZIP	ST PETERSBURG FL 33702				
TITLE	D	DELETED			
NAME	GAUDET, JEFF				
STREET ADDRESS	798 CATTAIL COURTH NE				
CITY-ST-ZIP	ST PETERSBURG FL				
TITLE	D	DELETED			
NAME	STRAIGHT, MARIE				
STREET ADDRESS	200 82ND AVENUE AVENUE				
CITY-ST-ZIP	ST. PETERSBURG FL				
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE	Director	Change Addition			
1.2 NAME	Vincent Smith				
1.3 STREET ADDRESS	3542 66th Street North, #502				
1.4 CITY-ST-ZIP	St Petersburg FL 33710				
2.1 TITLE		Change Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
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	Director	Change Addition			
5.2 NAME	Beth Banger				
5.3 STREET ADDRESS	8790 53rd Way North				
5.4 CITY-ST-ZIP	Pinellas Park FL 33782				
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vincent Smith, Director 7/6/99 727-458-3398
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0012143

CR2E037 (5/99)