2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000084042

DOCUMENT #



FILED Apr 02, 2003 8:00 am Secretary of State 04-02-2003 90066 015 ***150.00

BRINK ENTERPRISES, INC.								04-02-2003 900	000 013	130.0	U	
11700 HIGHLAND PLACE 1				Mailing Address 11700 HIGHLAND PLACE CORAL SPRINGS FL 33071				1 114 (111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
2. Principal Place of Business 3. M				Mailing Address								
Suite, Apt.	#, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			4.	FEI Number 65-1041032			plied For t Applicable	
Zip	Country		Zip			try		5. Certificate of Status Desired S8.75 Add Fee Required 7. Name and Address of New Registered Agent				
6. Name and Address of Current Registered Agent								Name and Address of New Heg	istered Ag	ent		
BRINK, DAVID A 11700 HIGHLAND PLACE						Street Address (P.O. Box Number is Not Acceptable)						
CORAL SPRINGS FL 33071												
						City		FL Zip Code				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalting) QATE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Finan Trust Fund Contribution.	cing	\$5.0 Added	May Be to Fees	
10.		OFFICERS AN	D DIRECTO	D DIRECTORS 11.			A	ADDITIONS/CHANGES TO OFFICE	R\$ AND D	IRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		AVID A GHLAND PLACE PRINGS, FL 33071		☐ Delete						☐ Change	☐ Addition	
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12. Thereby o	ertify that the	information supplied wi	th this filina	does not qualify for	the exer	notion stated	in Section	n 119.07(3)(i), Florida Statutes, I fu	rther certify	that the in	formation [

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE;