2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 09, 2004 8:00 am **Secretary of State DOCUMENT # P00000087368** 03-09-2004 90015 042 ***150.00 1. Entity Name **BRYANAVA CORPORATION** Mailing Address Principal Place of Business 94026959 595 WEST GRANADA BOULEVARD 595 WEST GRANADA BOULEVARD SUITE A SUITE A ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 No Cha-P CR2E034 (10/03) 02182004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3672368 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MUL F. Holds JA SWEET, JEFFEREY C DO NOT WRITE 595 WEST ERANADA BOULEVARD MONGING MEMBER SUITE A ORNOND BEACH, FL 32174 675 NEW BEACH IN THIS SPACE ORMOND Boh Fl 32 is 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 8. The above named entity cubthe obligations of registered ag-SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE NAME SWEET, JEFFREY C ESQ. STREET ADDRESS 595 WEST GRANADA BOULEVARD #A CITY-ST-ZIP ORMOND BEACH, FL 32174 TITLE HOLUB, PAUL F JR NAME STREET ADDRESS 675 N BEACH STREET CITY-ST-ZIP ORMOND BEACH, FL 32174 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 th all other like empowered.

SIGNATURE:

CITY-ST-ZIP

NAME OF SIGNING O RDIRECTOR

2/2/04 386 673 74

FILED







VIA U.S. MAIL

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100000

DATE: M

March 2, 2004

MEMO TO:

Florida Department of State

Divisions of Corporations

FROM:

Paul F. Holub, Jr.

RE:

Bryanava Corporation

Document # P00000087368

Please be advised I would like to change the name and address of the Registered Agent to the following:

Paul F. Holub, Jr. Managing Member Bryanava Corporation P.O. Box 730086 Ormond Beach, FL 32173

The physical address is:

675 North Beach Street Ormond Beach, FL 32174

Thank you.

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