

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094534

FILED
Apr 23, 2004
Secretary of State

Entity Name: BRA BOX, INC.

Current Principal Place of Business:

3544 MAGELLAN CIR.
118
AVENTURA, FL 33180

New Principal Place of Business:

3401 S.W. 52ND STREET
FT. LAUDERDALE, FL 33312

Current Mailing Address:

3544 MAGELLAN CIR.
118
AVENTURA, FL 33180

New Mailing Address:

3401 S.W. 52ND STREET
FT. LAUDERDALE, FL 33312

FEI Number: 26-0036157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSKOVITZ, MICHELLE
3544 MAGELLAN CIR.
118
AVENTURA, FL 33180

Name and Address of New Registered Agent:

MOSKOVITZ, MICHELLE
126 BRIARWOOD CIRCLE
HOLLYWOOD, FL 33024

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.

SIGNATURE: MICHELLE MOSKOVITZ

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOSKOVITZ, MICHELLE
Address: 3544 MAGELLAN CIR.
City-St-Zip: AVENTURA, FL 33180

Title: VD () Delete
Name: WATSON, CYNTHIA
Address: 3401 S.W. 52ND ST.
City-St-Zip: FT. LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOSKOVITZ, MICHELLE
Address: 126 BRIARWOOD CIRCLE
City-St-Zip: HOLLYWOOD, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE MOSKOVITZ

PD

04/23/2004

Electronic Signature of Signing Officer or Director

Date