2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 08:00 All Secretary of State

ANNUAL REPORT				Secretary of Sta			
DOCUMENT # P02000027650 1. Entity Name FLETCHER & BRANDON, INC.						y	
Principal Place 2623 KOEHN BIG PINE KEY	I AVE.	Mailing Address 2623 KOEHN AVE. BIG PINE KEY, FL 33043	1		1000 NEW 1000 E1M 11	HIL BRING HICH ITONG SING BRING BRINGS HILLS	
<i>i</i> .	O NOT WRITE	IN THIS SPA	ĈF	03162007	No Chg-P	CR2E034 (11/05)	
<u>ت</u>				4. FEI Number 01-063 5. Certificate		Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NEALE, MICHAEL F JR. 2623 KOEHN AVE. BIG PINE KEY, FL 33043			Property of the second	•	NOT W		
the obligati	named entity submits this statement for the constant of registered agent. Signature, speed or printed name of registered agent and E NOWILL FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Fine	ed Agent signature require		th, in the State of Fi	lorida. I am familiar with, and accept OATE	
	OFFICERS AND D	<u> </u>	· · ·				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEALE, MICHAEL F JR. 2623 KOEHN AVE. BIG PINE KEY, FL 33043	HECTORS			U00000	0725659 -80031-015 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DIKO, BRANDON S 2623 KOEHN AVE. BIG PINE KEY, FL 33043				05/05/01 ⁻	.onnot_oto 120,00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			; t ; s ; ;		NOT V		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 address, with all other like empowered.

SIGNATURE:

NAME STREET ADORESS CITY-ST-ZIP

michael F. Meal

MICHARL F. NEALE JR 4

305-515-0151