

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

02-24-2003 90172 012 ***150.00

DOCUMENT # P02000028711

1. Entity Name
BRAZART, CORP.

Principal Place of Business
**220 THREE ISLANDS BLV.
206
HALLANDALE, FL 33009**

Mailing Address
**220 THREE ISLANDS BLV.
206
HALLANDALE, FL 33009**

2. Principal Place of Business
238 Commercial Blvd

3. Mailing Address
238 Commercial Blvd

Suite, Apt. #, etc.
2

Suite, Apt. #, etc.
2

City & State
Lauderdale By The Sea

City & State
Lauderdale By The Sea

Zip Country
FL

Zip Country
FL



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
01-0633353

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SOUSA, LUCIANE F
238 EAST COMMERCIAL BLVD., #2
LAUDERDALE-BY-THE-SEA, FL 33308**

7. Name and Address of New Registered Agent

Name
LUCIANE F. Sousa

Street Address (P.O. Box Number is Not Acceptable)
238 Commercial Blvd #2

Lauderdale By The Sea, FL

City Zip Code
FL 33308

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's signature required when registering)

03/03/03
DATE

**FILED NOV 11 FEB 19 \$150.00
After May 1, 2003, Fee will be \$650.00
Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
PD	JOAO, FERNANDO	238 COMMERCIAL BLVD., #2	LAUDERDALE-BY-THE-SEA, FL 33308	☐
VD	SOUSA, SHELLY	238 COMMERCIAL BLVD., #2	LAUDERDALE-BY-THE-SEA, FL 33308	☐
STD	SOUSA, LUCIANE F	238 COMMERCIAL BLVD., #2	LAUDERDALE-BY-THE-SEA, FL 33308	☐
				☐
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Luciane F. Sousa Secretary/Treasurer

03/03/03
Date

Daytime Phone #

CFR2034 (10/02)