

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2005 8:00 am
Secretary of State

02-08-2005 90006 008 ***150.00

DOCUMENT # P02000072771

1. Entity Name

BRANDEL ENTERPRISES, INC.



Principal Place of Business

1093 A1A BEACH BLVD PMB 341
SAINT AUGUSTINE FL 32080-6733

Mailing Address

1093 A1A BEACH BLVD PMB 341
SAINT AUGUSTINE FL 32080-6733

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

42-1543588

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RATKOVIC, MICHELLE
40-203 CLUB HOUSE DRIVE
PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name **Ratkovic, Michelle**

Street Address (P.O. Box Number is Not Acceptable)

988 Windward Way

City **ST. Augustine**

FL

Zip Code

32080

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

Michelle Ratkovic

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/05

FILE NOW!!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make 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 **PST** ☐ Delete
NAME **RATKOVIC, MICHELLE**
STREET ADDRESS **40 - 203 CLUB HOUSE DR**
CITY-ST-ZIP **PALM COAST FL 32137**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PST** ☒ Change ☐ Addition
NAME **Ratkovic, Michelle**
STREET ADDRESS **1093 A1A Beach Blvd PMB 341**
CITY-ST-ZIP **ST. Augustine, FL 32080-6733**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

Michelle Ratkovic

2/1/05

Date

386-503-3855

Daytime Phone #