
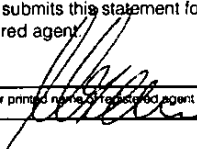
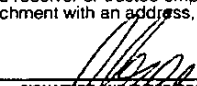


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90006 036 ***150.00

DOCUMENT # P05000113603 1. Entity Name BRM INTERNATIONAL INC.					
Principal Place of Business 104 CEDAR AVENUE SEFFNER, FL 33584			Mailing Address 104 CEDAR AVENUE SEFFNER, FL 33584		
2. Principal Place of Business - No P.O. Box # 2104 VALRICO HTS BLVD		3. Mailing Address SAME			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		01072007 Chg-P CR2E034 (12/06)	
City & State VALRICO, FL		City & State 		4. FEI Number 20-3303265	
Zip 33594		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MIZERA, RYSZARD B 104 CEDAR AVENUE SEFFNER, FL 33584				7. Name and Address of New Registered Agent Name RYSZARD MIZERA Street Address (P.O. Box Number is Not Acceptable) 2104 VALRICO HTS BLVD City VALRICO FL Zip Code 33594	
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> RYSZARD MIZERA REGISTERED AGENT </div> <div style="width: 30%; text-align: right;"> 2/26/07 <small>DATE</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MIZERA, RYSZARD B 104 CEDAR AVENUE SEFFNER, FL 33584	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MIZERA, BARBARA M 104 CEDAR AVENUE SEFFNER, FL 33584	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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:  RYSZARD MIZERA PRES. 2/26/07 813-774-8514					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					