FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P37440

1. Corporation Name

BRANDON CAPITAL CORPORATION

Principal Place of Business: 2146 N. FEDERAL HIGHWAY, FT. PIERCE, FL. 34946

Mailing Address: P.O. BOX 690116, VERO BEACH, FL. ~~US~~. 32969

AMENDED

3. Date Incorporated or Qualified: 02/11/92

4. FEI Number: 41-1624504 (Applied For / Not Applicable)

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: $5.00 Will Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax: X Yes

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 P.O. BOX 690116 Suite, Apt. #, etc.
27 City & State 28 VERO BEACH, FL
Zip 29 32969 Country 30 US

9. Name and Address of Current Registered Agent

MOSLEY, CURTIS R. ESQ.
1221 EAST NEW HAVEN AVENUE
MELBOURNE, FL. 32901

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its principal office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature (typed or printed) of registered agent and the date signed (NOTE: Registered Agent must sign and date when [illegible])

12. OFFICERS AND DIRECTORS

TITLE C. PRESIDENT [ ] DELETE
NAME HESSEE, CLAUDE T.
STREET ADDRESS 215 GLENGARRY AVE
CITY-ST-ZIP MELBOURNE BEACH, FL 32951

TITLE D SEC [ ] DELETE
NAME HESSEE, PATRICIA A.
STREET ADDRESS 215 GLENGARRY AVE.
CITY-ST-ZIP MELBOURNE BEACH, FL 32951

TITLE V. PLATA, FRANK S. [ ] DELETE
NAME
STREET ADDRESS 3700 N. HARBOR CITY BLVD. STE. 2
CITY-ST-ZIP MELBOURNE, FL 32935

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE V. CONSTRUCTION [ ] DELETE X
12 NAME HESSEE, MARK
13 STREET ADDRESS 6545 FLORIDANA AVENUE
14 CITY-ST-ZIP MELBOURNE BEACH, FL 32951

21 TITLE [ ] DELETE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE [ ] DELETE [ ] ADD
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE [ ] DELETE [ ] ADD
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE [ ] DELETE [ ] ADD
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Patricia A. Hessee Sec. 3/29/99 ~~1-1-99~~ 407-952-8372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone