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

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P93000019055 (1)

BRELIANT REALTY, INC. PROPERTY MANAGEMENT

Principal Plac	e of Business	Mailing Address				
3454 TAMPA		3454 TAMPA RD.				
PALM HARBOR FL 34684 PALM HARBOR FL 34684			884			
				DO NOT WRITE IN THI	S SPACE	
				3. Date Incorporated or Qualified		
9 Principal F	Place of Business	2a, Mailing Address		03/12/1993 4. FEI Number	Analised Fav	
21	iace or pusitiess	26. Walling Address		] =	Applied For Not Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		59-3183709	\$8.75 Additional	
22	, •	27		5. Certificate of Status Desired	Fee Required	
City & Stat	le .	City & State		Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	current year Intangible	
4	25	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No	
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registers	d Agent	
BR	ELIANT, EDWARD		81 Name			
3454 TAMPA ROAD			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
PA	LM HARBOR FL 34684		<u>                                     </u>			
			83			
			84 City		85 Zip Code	
				proporation submits this statement for the purpose ation's board of directors. I hereby accept the a		
SIGNATURE	im familiar with, and accept the oblig		FIOTICIA Statutes.  IOTE Registered Agent signature rec	oved when reinslating) DATE		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITLE		Change  Addition	
NAME	<b>Br</b> eliant, Edward		1.2 NAME			
STREET ADDRESS	<b>3454</b> TAMPA RD.		1.3 STREET ADDRESS	4338 LIVE DAK BLUD. PALM HARBOR, FL 34  4338 LIVE DAK BLUD PALM HARBOR, FL 3		
CITY-ST-ZIP	PALM HARBOR FL 34684		1,4 City-St-Zip	PACH HARBOR FL 34	685 <u> </u>	
TITLE	ST	☐ DELETE	2.1 TITLE	•	Change 🔲 Addition	
NAME	BRELIANT, RUTH		2.2 NAME	- 4 - 6 - 4 1 - 4		
STREET ADDRESS	3454 TAMPA RD.		2.3 STREET ADDRESS	4338 CIVE WAY DEAD		
CITY-ST-ZIP	PALM HARBOR FL 34684		2. 4 CITY - ST - ZiP	PACM HARBOR FL 3	4685	
TITLE		☐ DELETE	3.1 TITLE	• • •	☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			33 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			. 4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY-ST-ZIP			
TITLE		☐ DELET <b>E</b>	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET APPRIESS			5.3 STREET ADDRESS			

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

14. Thereby certify that the information supplied with this fitting 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 of 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 of trusted employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 ifchanged, or organization men with a societies.

DELETE

Change

☐ Addition

**FILED** 

May 06 1998 8:00am

Secretary of State

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