## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

P93000029410 (6)

**BROP REALTY COMPANY** 

Principal Piace of Business Mailing Address				E HEDITODI AM AUTO MARA ODIAN DU	III OORII BOIK IIDID LOID DIDBI JIFII OOM IDDI
1124 WAVERLY DR. DAYTONA BEACH FL 32118		1124 WAVERLY DR. DAYTONA BEACH FL 32118			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				04/20/1993	01/17/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suito Act # otc		Suite Act # atc		59-3178591	Not Applicable  \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		6, Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24]	25 25 29. Name and Address of Curre	nt Pagistered Agent	[30]	Florida Statutes Yes  10. Name and Address of New R	
	9. Name and Address of Carre	it negistered Agent	81 Name	To. Italia alla Addissa di Italia	ohistorea vilone
DUDAIC	TT BDOD V			(D.O. Day blumbar in blak Assessable	Ia)
	tt, brop k /Averly dr.		82 Street Addr	ress (P.O. Box Number is Not Acceptab	<del>ie</del> j
DAYTONA BEACH FL 32118			83		
			84 City		85 Zip Code
- 3:2	10 1 007 050	0		ration submits this statement for the pur	FL V
familiär with SIGNATURE	, and accept the obligations of, Sec quature typed or matted name of registered ages	nt and title of applicable 2000.	TE Registered Agent signature require		DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
Title	D	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	BURNETT, BROP K		1.2 NAME		
STREET ADDRESS CITY-ST-ZIF	1124 WAVERLY DR. DAYTONA BEACH FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
1011	DATIONA DENOITE	☐ DELETE	2 1 TiTLE		☐ Change ☐ Addition
NAM:			2.2 NAME		
STREET ADDRESS			23 STREET ADDRESS		
CITY St. ZIP			24 CITY - ST - ZIP		
11*LF		DELETE	3 1 TOTLE		* Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		
CHY-ST-ZIP TITLE		DELETE	4 1 TITLE		Change Addition
NAMs			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
C(1) - S(1 - Z(f)			4.4 CITY - ST - ZIP		
TILE		☐ DELETE	5. 1 THTLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CFY-S1 ZIP		DELETE	5.4 CITY-ST-ZIP 6. 1 TITLE		☐ Change ☐ Addition
TIFLE		[] vereit	6.2 NAME		Change Chyantian
NAME STREET ADDRESS			6.3 STREET ADDRESS		
STREET FALLOMENS CITY - ST - Z4C			6.4 CITY-ST-ZIP		
14. Ldo hereby	certify that the information supplied	I with this filing is voluntarily furr	ished and does not qualify	for the exemption stated in Section 119	.07(3)(k), Florida Statutes, I further
oath, that I	the information indicated on this an am an officer or director of the corp Block 12 or Block 13 if changed, or	poration or the receiver or truste	e empowered to execute th	ate and that my signature shall have the iis report as required by Chapter 607, F	same legal effect as if made under lorida Statutes; and that my name

SIGNATURE: Brow Kelly Burnello 1-30-96 255-451