

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000035767 (1)

1. Corporation Name

BRASUSA CORPORATION

Principal Place of Business

**1246 S MILITARY TR
STE 624
DEERFIELD BCH FL 33442
US**

Mailing Address

**1246 S MILITARY TR
STE 624
DEERFIELD BCH FL 33442
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/18/1993

3a. Date of Last Report

04/28/1994

4. FET Number

65-0408488

Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 193.042
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 5525 NW 74 Ave

Suite, Apt. #, etc.

22

City & State

23 Miami, FL 33166

Zip

Country

24 33166 25 Dade

9. Name and Address of Current Registered Agent

**SILVA, LUCIA H
1246 S MILITARY TR
STE 624
DEERFIELD BCH FL 33442**

2a. Mailing Address

26 5525 NW 74 Ave

Suite, Apt. #, etc.

27

City & State

28 Miami, FL 33166

Zip

Country

29 33166 30 Dade

81 Name

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

2820 NE 201 TRAIL APT. 216

83

84 City

Aventura

FL

85 Zip Code

33180

11. Pursuant to the provisions of Sections 607.0717 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered 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 607.0709, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

**D
NAME
SILVA, LUCIA H M
STREET ADDRESS
1246 MILITARY TRAIL #624
CITY-ST-ZIP
DEERFIELD BEACH FL 33442**

**NAME
STREET ADDRESS
CITY-ST-ZIP**

**NAME
STREET ADDRESS
CITY-ST-ZIP**

**NAME
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CITY-ST-ZIP**

**NAME
STREET ADDRESS
CITY-ST-ZIP**

**NAME
STREET ADDRESS
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **President** ☒ Change ☐ Addition

12 NAME

2820 NE 201 TRAIL #216

13 STREET ADDRESS

Aventura, FL 33180

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

2820 NE 201 TRAIL #216

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:

LUCIA H. M. SILVA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUCIA SILVA 5/10/96

(17)

Exempt from fee