FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90184 046 ***150.00

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

DOCUMÊNT # **P93000051633**

1. Corporation Name

BRIDY ENTERPRISES, INC.

Principal Place of Business Mailing Address							. 44161 91181 11818 91188	
2407 NW 135 ST. 2407 NW 135 ST.								
STE. 101 STE. 101 MIAMI FL 33167 MIAMI FL 33167						DO NOT WRITE IN THIS SPACE		
MIMMITE 33107						3. Date Incorporated or Qualifed		
						07/19/1993		Ì
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21 26						65-0427741		t Applicable
Suite, Apt. #, etc.						5. Certifcate of Status Desired	\$8.75 A	
22								<u> </u>
						6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	- 1
23 Zip	Country	Zip	Count	ry		8. This corporation owes the current ye		
24	25	29 30				Personal Property Tax.		□No
1	9. Name and Address of Current		<u> </u>	•		10. Name and Address of New Regis	ered Agent	
			8	1 Nar	ne			
BRIDY, EDWARD A			8	2 Stre	et Addre	dress (P.O. Box Number is Not Acceptable)		
2407 NW 135 ST.				onest vestes (i. i.e. bes realised in the section of				
STE. 101 MIAMI FL 33167			8	3				
MIN	WI FL 3310/		8	4 City			85 Zip C	Code
							alaka sa al	
11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: R	enistered An	ent signat	ure required	when reinstating)	ATE	
12.	OFFICERS AND		13.	on bigna	5.0 taq	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
TITLE	DP □ DELETE 1.1		1.1 TITLE				☐ Change	☐ Addition
NAME	BRIDY, EDWARD A		1.2 NAME					
STREET ADDRESS 2407 NW 135 STREET, #101			1.3 STREET ADDRESS		ss			
CITY-ST-ZIP	MIAMI FL 33167		1.4 CITY-	ST-ZIP				
TITLE	☐ DELETE 2.11		2.1 TITLE				☐ Change	☐ Addition
NAME	2.21		2.2 NAME	Ē				,
STREET ADDRESS			2.3 STRE	ET ADDRE	ESS			Ì
CITY-ST-ZIP	<u></u>		2. 4 CiTY					o de sancia de
TITLE			3.1 TITLE				⁻ ⁻ ☐ Change	- Addition
NAME	3000	∞	3.2 NAME		Į			Į.
STREET ADDRESS	211	10,		ET ADDRI	ESS			
CITY-ST-ZIP	<u></u>	DELETE	3.4. CITY 4.1 TITLE				Change	Addition
TITLE			1		1		_ Grizings	
NAME	# 150°	127	4. 2 NAM					
STREET ADDRESS	**	48	4.4 CITY-	ET ADDRE	-33			
CITY-ST-ZIP TITLE			5.1 TITLE		+-		Change	☐ Addition
NAME	C/~		5.2 NAME				_ •	
STREET ADDRESS	\sim 0	J. L.	5.3 STRE	ET ADDRI	ss			
CITY-ST-ZIP	100	ン *	5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		\top		☐ Change	Addition
NAME			6.2 NAME					

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ICER OR DIRECTOR