

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000062719 (8)

1. Corporation Name

A BRADLEY H. MEVS ENTERPRISES, INC.



Principal Place of Business

Mailing Address

10140 NW 42 AVE.
MIAMI FL 33064
US

339 VIRGINIA ST
HOLLYWOOD FL 33020
US

3. Date Incorporated or Qualified
09/08/1993

3a. Date of Last Report
04/18/1995

2. Principal Place of Business

2a. Mailing Address

21 14759 N. Miami Ave.
Suite, Apt. #, etc.

26 14759 N. Miami Ave.
Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami FLA

28 Miami, FLA

Zip

Country

Zip

Country

24 33168

25 DADC

29 33168

30 DADC

4. FEI Number

65-0436652

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. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEUS, BRADLEY H
339 VIRGINIA ST
HOLLYWOOD FL 33020

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 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

Bradley H. Meus
Signature, typed or printed name of registered agent and title of applicant

BRADLEY H. MEUS

PRES.

5/1/96

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MEUS, BRADLEY H
STREET ADDRESS 339 VIRGINIA ST
CITY-STATE-ZIP HOLLYWOOD FL

☐ DELETE

TITLE D
NAME SPENCER, LEE
STREET ADDRESS 1881 NW 66 ST
CITY-STATE-ZIP MIAMI FL

☐ DELETE

TITLE D
NAME WARREN, SHAWN
STREET ADDRESS 1880 NW 86 TERR
CITY-STATE-ZIP MIAMI FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/96

(305) 947-0777

DATE

DAYTIME PHONE #

CR2E034 (12/95)