

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

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AND
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98 JUN 26 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000070123

1. Corporation Name

BUSINESS REPRESENTATIONS INT'L, INC.

Principal Place of Business 800 BRICKELL AVE 1109 MIAMI, FL 33131	Mailing Address 800 BRICKELL AVE #1109 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/8/93	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0459790	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
JOSE C. LORENZO 800 BRICKELL AVE. #1109 MIAMI, FL 33131		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

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES/DIRECTOR <input type="checkbox"/> DELETE ESTHER LORENZO 800 BRICKELL AV #1109 MIAMI, FL 33131	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500002576005 -06/30/98-01040-009 ***315.00 ***315.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SITID <input type="checkbox"/> DELETE JOSE C. LORENZO 800 BRICKELL AVE #1109 MIAMI, FL 33131	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR <input type="checkbox"/> DELETE JOSEPH C. LORENZO 800 BRICKELL AV #1109 MIAMI, FL 33131	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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

Date

Daytime Phone #

04/25 98 305
381-8541 #7606

206 2

BUSINESS REPRESENTATION INTERNATIONAL, INC.
800 BRICKELL AVE., SUITE 1109
MIAMI, FL. 33131
Tel. (305) 381-8541 Fax. (305) 381-6079

June 5, 1998

Florida Department of State
P.O. Box 6327
Tallahassee, Fl. 32314

Dear Sirs:

We are in receipt of your letter dated May 7, 1998 in reference to our 1998 corporate annual report that was sent back because the company was administratively dissolved due to failure to file 1997 corporate annual report.

We called your reinstatement department and spoke to Tyron. We explained that for the past three years we have not been receiving the annual corporate reports from the Department of State because the address on your files is incorrect. To file our annual reports we always have had to download a generic form from the Internet. Every year when we have filed we have sent address corrections, but apparently your system has not been updated to send the form to our correct address.

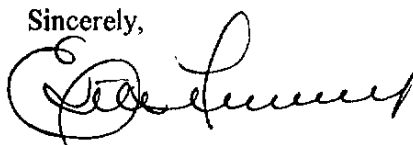
We request that you please check your files to verify that we have previously sent address corrections and that based on those facts you accept to reinstate our corporation with the pertinent fees of 1997 & 1998 report.

We would like to take this opportunity to request that your system is updated in every area with our correct address.

I am enclosing copies of your letter, the 1997 & 1998 corporate annual report and a check in the amount of \$315.00.

Should you have any questions, please call us.

Sincerely,



Esther Lorenzo
President
B.R.I. Inc.