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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000082003

1. Corporation Name

BROSIS MANAGEMENT GROUP, INC.

Principal Place of Business
1401 Brickell Ave.
Suite 420
Miami, FL 33131

Mailing Address
1401 Brickell Ave.
Suite 420
Miami, FL 33131

3. Date Incorporated or Qualified
12/01/93

3a. Date of Last Report
5/1/96

2. Principal Place of Business
21 5565 N.W. 74th Ave.

2a. Mailing Address
26 5565 N.W. 74th Ave.

4. FEI Number
65-0476558

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State
23 Miami, FL

27 City & State
28 Miami, FL

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip
33166

Country

29 Zip
33166

Country

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

Arevalo, Miguel
1401 Brickell Ave.
Suite 420
Miami, FL 33131

81 Name

82 Street Address (P.O. Box Members Not Acceptable)
800002504908--5

83 09/26/97-01080-002

****550.00 ****550.00

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME Arevalo, Luis
STREET ADDRESS 1401 Brickell Ave., Suite 420
CITY-ST-ZIP Miami, FL 33131

1.1 TITLE D
1.2 NAME Arevalo, Luis
1.3 STREET ADDRESS 5565 N.W. 74th Ave.
1.4 CITY-ST-ZIP Miami, FL 33166

TITLE P
NAME Arevalo, Miguel
STREET ADDRESS 1401 Brickell Ave., Suite 420
CITY-ST-ZIP Miami, FL 33131

2.1 TITLE P
2.2 NAME Arevalo, Miguel
2.3 STREET ADDRESS 5565 N.W. 74th Ave.
2.4 CITY-ST-ZIP Miami, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE S
3.2 NAME Arevalo, Jeannette
3.3 STREET ADDRESS 5565 N.W. 74th Ave.
3.4 CITY-ST-ZIP Miami, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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

Secretary

09/25/97 (305) 884-3333

Date

Daytime Phone #