PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90123 021 ***150.00

DOCUMENT # P9400002331

1. Corporation Name

BRAWO INTERNATIONAL TRADE COMPANY, INC.

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Principal Place	of Business	Mailing Address	ζΞ		T (BBT/BBt T/B tått) åtåt sått) asit) asit) asit)	H-BOOK CONTACTORY	9 (110 6 (116)	11013001
3410 EMERALD #302A	POINTE DR	3410 EMERALD POINTE DR #302A	• • • •					
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021					DO NOT WRITE IN THIS SPACE			
US		US	-		3. Date Incorporated or Qualifed 01/11/1994			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied	For
21		26			65-0464601		Not App	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		1	5. Certifcate of Status Desired	\$8.	75 Additi	ional
22		27	27		5. Certificate 6i Status Desired	Fe	ee Require	∌d
City & State	e	City & State	•		6. Election Campaign Financing Trust Fund Contribution		.00 May	
Zip	Country		ountry		8. This corporation owes the current ye			
24	25	29 30		,	Personal Property Tax.	Yes	_	10
24)	9. Name and Address of Curren		Т	_	10. Name and Address of New Regis	tered Agent		
	o. Italia dia riadiose oi esite.		81	Name				
dziugiel, leszek				0	(D.O. D., M. mbor in Not Assessable)			
3410		82	Street Addres	ss (P.O. Box Number is Not Acceptable)				
#302A			83	1		_		
HOL	LYWOOD FL 33021			ļ.,			Zin Cada	
			84	City	٠	FL 85	Zip Code	'
l office or n	to the provisions of Sections 607.050, egistered agent, or both, in the State in familiar with, and accept the obligat	of Florida. Such change was authoriz tions of, Section 607.0505, Florida St	ed by atutes	the corporation	ation submits this statement for the purpies board of directors. I hereby accept the	appointment	as registe	red
12.		D DIRECTORS 1		in agrician coquiros	ADDITIONS/CHANGES TO OFFICE		ECTORS I	N 12
TITLE	DPST		TITLE	<u> </u>		Cha	ange [Addition
NAME	DZIUGIEL, LESZEK	1.2	NAME					
STREET ADDRESS	3410 EMERALD POINTE DR A	PT 302A 1.3	STREE	TADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		CiTY-5	ST-ZIP				
TITLE			TITLE			Ch:	ange	Addition
l NAME I	•	2.2	NAME					}
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NAME		3.2	NAME					
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TITLE			TITLE			☐ Çh.	ange [Addition
NAME	•		NAME	ļ				
STREET ADDRESS		6.3	STREE	T ADDRESS				
CITY-ST-ZiP		6.4	CITY-	ST-ZIP				

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.

SIGNATURE: