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Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000015013 (3)

1. Corporation Name
BRASSLINE ARCHITECTURAL PRODUCTS, INC.



Principal Place of Business
7170 S.W. 47TH STREET
MIAMI FL 33155

Mailing Address
7170 S.W. 47TH STREET
MIAMI FL 33155-4655

3. Date Incorporated or Qualified
02/24/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

4. FEI Number

65-0416535

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

MEDINA, ERNESTO
7170 S.W. 47TH ST.
MIAMI FL 33155

81 Name

MIGUEL NODARSE

82 Street Address (P.O. Box Number is Not Acceptable)

7170 SW 47 ST

83

84 City

MIAMI

FL

85 Zip Code

33155

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, 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

MIGUEL NODARSE, PRESIDENT

4/10/97

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 PD
NAME NODARSE, MIGUEL
STREET ADDRESS 6820 S.W. 29TH ST.
CITY-ST-ZIP MIAMI FL 33155

DELETE

TITLE VD
NAME MEDINA, ERNESTO
STREET ADDRESS 10501 S.W. 145TH COURT
CITY-ST-ZIP MIAMI FL 33186

DELETE

TITLE ST
NAME MEDINA, BRUNY
STREET ADDRESS 10501 S.W. 145 CT
CITY-ST-ZIP MIAMI FL

DELETE

TITLE D
NAME NODARSE, LORI
STREET ADDRESS 6820 SW 29 ST
CITY-ST-ZIP MIAMI FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE P
1.2 NAME NODARSE MIGUEL
1.3 STREET ADDRESS 10501 SW 145 CT.
1.4 CITY-ST-ZIP MIAMI, FL 33186

Change Addition

2.1 TITLE VP
2.2 NAME MEDINA, ERNESTO
2.3 STREET ADDRESS 7170 SW 47 ST
2.4 CITY-ST-ZIP MIAMI, FL 33155

Change Addition

3.1 TITLE ST
3.2 NAME MEDINA, BRUNY
3.3 STREET ADDRESS 7170 SW 47 ST
3.4 CITY-ST-ZIP MIAMI, FL 33155

Change Addition

4.1 TITLE D
4.2 NAME NODARSE, LORI
4.3 STREET ADDRESS 10501 SW 145 CT
4.4 CITY-ST-ZIP MIAMI, FL 33186

Change Addition

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

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do 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.

SIGNATURE: MIGUEL NODARSE, PRESIDENT 4/10/97 (305) 667-0110

CP2E034 (9/96)