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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000027517 (9)

BRULO CORPORATION

Principal Place of Business

Mailino Address

FILED Apr 25 1997 8:00am Secretary of State



2905 N.W. 21ST AVENUE OAKLAND PARK FL 33311			2905 N.W. 21ST AVENUE OAKLAND PARK FL 33311-2121						
						3. Date incorporated or Qualified 04/08/1994	3a. Dat 05/0	e of Last 1/1996	Report
	lace of Business		2a. Mailing Address			4. FEI Number 65-0500197			Applied For
Suite, Apt	#. etc.	26 Suite, Apt. #, et	Suite, Apt. #, etc.			00 000 187			Not Applicable Additional
22		27	27			5. Certificate of Status Desired			Required
City & State	O	City & State	h			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zıp 24	Count 25	29	29 30			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes ✓ Yes ☐ No			
Name and Address of Current Registered Agent						10. Name and Address of New Reg			
	KINT, BRUCE			81	Name				
2905 N.W. 21ST AVENUE OAKLAND PARK FL 33311				82	Street Ad	dress (P.O. Box Number is Not Acceptab	le)		
				83					
				84	City	THE STATE OF THE S	FL	85 Zip	o 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		no of registered agent and title if applicable				puired when rainstating)	DATE		
12.		OFFICERS AND DIRECTORS	13.	o Age	The angliance req	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TITLE	P	DELE	TE 1.1 T	TLE				Change	(
NAME	LIPKINT, BRUCE		1.2 N	AME					
STREET ADDRESS	2905 NW 21 AVE		1.3 S	TREET	ADDRESS				1
CITY - ST - ZIP	OAKLAND PARK F				T-ZIP				
THILE	LIPKINT, LIONEL	☐ DELE	/-				Į.	Change	Addition C
NAME	2905 NW 21 AVE		2.2 N						
STREEL ADDRESS	OAKLAND PARK F	:1			ADDRESS				
CITY - ST - ZIP TITLE	ST	DELE			ST-ZIP			Change	Addition
NAME	LIPKINT, PAMELA	_ out	3.1 H				L	Unange	L Addition
STREET ADDRESS	2905 NW 21 AVE.	•			ADDRESS				
CITY - ST - ZIP	OAKLAND PARK F	L	1		ST-ZIP	,			
TOLE		DELE			71-211		[Change	Addition
NAME			4.21	IAME			-		
STREET ADDRESS			4.3 \$	TREET	ADDRESS				
CITY - \$1 - ZIP			4.4 C	ITY-\$	T-ZIP	· ·			
THILE		☐ DEL€	TÉ 5.1 TI	TLE				Change	Addition
NAME:			5.2 N	AME	.	•			
STREET ACCRESS			5.3 \$	TREET	ADDRESS				ŀ
City St-7i5				ITY-S	T-ZIP				
TITLE		☐ DELE	TE 6.1 TI	TLE				Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP			6.4 C	ITY-S	T-ZIP				
14. I do heret	uy certify that the inform	iation supplied with this filing does not	quality for the	exe	mption state	ed in Section 119.07(3)(i), Florida Statutes	: I further (certify that	at 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 occiver 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 or an attachment with an address.