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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400040966 (1)

BRENDA	A'S BIRDS, INC.						
Principal Place of Business 324 NE 3RD AVE DELRAY BEACH FL 33444		Mailing Address 324 NE 3RD AVE.	•		I (ADDINOO) KIE IBAR ONON DONN BOKI DEN	N ODDIT BİDIL KƏRB IBIDƏ OLUÐ) Billy (IRV)
US DELHAT BEACH	H PL 33444	US DEACH FL 3344	H-3012			T	
					3. Date Incorporated or Qualified	3a. Date of Last Re	port:
2. Principal Pa	ace of Business	2a, Mailing Address			05/26/1994 4. FEI Number	1 04/08/1996	plied For
21		26	 		65-0492228	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	├─ ─		5. Certificate of Status Desired	□ \$8.75 A	
City & State		City & State	27 City & State		O. Station Committee State aire	Fee Rec	-,
23		28	28		Election Campaign Financing Trust Fund Contribution	\$5.00 to Added to	
Zip Country 25		Z _I p 29	1 		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	g. Name and Address of C	urrent Registered Agent			10. Name and Address of New Re	gistered Agent	
MCE	BRINN, BRENDA		81	Name			
324	NE 3RD AVE.		82	Street Addr	ess (P.O. Box Number is Not Acceptab	ole)	
DEL	RAY BEACH FL 33444		83				
			<u></u>				
			84	City		FL 85 Zip C	Jode
agent Lar - SIGNATURE	in familiar with, and accept the standard typestar polited name of registri	obligations of, Section 607,0505, F	lorida Statute:	S.	coration submits this statement for the prior's board of directors. I hereby accepted when relisteting) ADDITIONS/CHANGES TO OFFICE	DATE	
TITLE	Ď	☐ DELETE	1.1 TITLE		ADDITIONO/OFFANGES TO OFFIC	Change	Addition
NAME.	MCBRINN, BRENDA		1.2 NAME	Ì			
STREEL ADDRESS	324 NE 3RD AVE.		1.3 STREET	ADDRESS			
CITY-ST-ZIP TITLE	DELRAY BEACH FL.	DELETE	1.4 CITY-5 2.1 TITLE	ST-ZIP		Change	Addition
NAME		L. J OLK IL	2 2 NAME			L Change	
STREET ADDRESS			2.3 STREET	ADORESS			
CITY-ST-ZP			2 4 CITY-	ST-ZIP			
MILE		DELETE	31 TITLE	į		L_J Change	
NAME STREET ADORESS			3.2 NAME	r address			
City-\$1-Zif			3.4. CITY -				
TITLE		DELETE	4.1 TITLE		, , , , , , , , , , , , , , , , , , ,	☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CHY-ST-7IP TITLE		DELETE	4.4 CiTY-5	ST-ZIP		Change	Addition
NAME			5.2 NAME				_
STREET ADDRESS			5.3 STREET	r address			
CITY - S1 - Z(f)	,	Dr. 577	5.4 CITY - 5	ST - ZIP			The Address
TITLE		DELETE	6.1 TITLE 6.2 NAME			L Change	Addition
NAMI' STREET ADDRESS	•			T ADDRESS			
CITY-ST-ZIP			64 CITY- :				
14. I do heret	by certify that the information su	pplied with this filing does not qua	lify for the exe	emption stated	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega	s. I further certify that t	the
Lam an o	flicer or director of the corporat		wered to exec		t my signature shair have the same legant as required by Chapter 607, Florida S		