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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000047352 (7)

BEAR & BROCK ENTERPRISES, INC.

Principal Pla	ce of Busines	ss	Mailing Ad	Mailing Address					A DOMINEL HIS LOW SAFAL SEAL	ODIA He ri Deih i	Jidii Mada IIIdi i	(())
2262 ALOMA	AVENUE		2262 ALO	2262 ALOMA AVENUE								
WINTER PARK FL 32792				WINTER PARK FL 32792				DO NOT WRITE IN THIS SPACE				
									3. Date Incorporated or Qua		15 SPACE	
									06/24/1994	unieu		
2. Principal	Place of Busi	ness	2a. Mailino	2a, Mailing Address					4. FEI Number			Applied For
21				26				-	59-3254329			Not Applicable
Suite, Ap	t. #, etc.			Suite, Apt. #, etc.						ed 🗀		Additional
22			27	27					5. Certificate of Status Desir	ea 🗆	Fee	Required
City & Sta	ate		City &	City & State					6. Election Campaign Finan	cing	\$5.0	0 Мау Ве
23			28						Trust Fund Contribution			d to Fees
Zip		Country	<u>-</u> -	Zip Cou				8. This corporation owes		•		Blue.
24	25			29 30					Personal Property Tax du			∐ No
		and Address of Curr	ent Hegistered A	gent		B1	Name		10. Name and Address of N	ew Register	ad Agent	
	HRLICH, HA				Ì	ויי	Name					
	82 ALOMA						Street	Addres	s (P.O. Box Number is Not Ac	ceptable)		
77	INTER PARM	\ FL 32/82			-	83						
					1	84	City			~·····································	ne 7:	o Code
					ŀ		City			F	: L	
11, Pursuan	to the provis	sions of Sections 607.0	502 and 607.1508	, Florida Statute	es, the ab	ovo	-named	corpor	ation submits this statement fo 's board of directors. I hereby	r the purpose	e of changing	its registered
egent. I	am familiar w	gent, or both, in the Sta rith, and accept the obt	igations of, Section	n 607.05 05 , Flo	orida Stati	utes	ine corp	poration	is board of directors, i hereby	acceptine a	ippointment a	is registered
SIGNATURE	:											
	Signature, typed	or printed name of registered a		le. (NOTE		Agor	nt signature	required (when reinstating)	DATE		
12.	1 65	OFFICERS A	ND DIRECTORS	I DELETE	13.			,	ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	OP OF			L DELETE	1.5 TIT						L Change	Addition
NAME		H, HAL M			1.2 NA							
STREET ADDRESS		OMA AVE.					ADDRESS					
CITY-ST-ZIP		PARK FL 32792		DELETE	1.4 CIT		- 7{P				Change	Addition
TITLE	DST	CUDIOTADUED A		□ Octete	21 111		ı				□ change	: Modition
NAME		CHRISTOPHER A			2.2 NA							
STREET ADDRESS		.oma ave. Park fl 32792					ADDRESS					1
CITY-ST-ZIP TITLE	MANIEN	PARK PL 02/82	· · · · · · · · · · · · · · · · · · ·	DELETE	2. 4 CC 3.1 TIT		1-ZIP	 			Change	Addition
NAME				hand DELETE	3.1 NA						Change	L- Nuclion
STREET ADDRESS							ADDRESS					
	'											
CITY-ST-ZIP TITLE	 -			DELETE	3.4. CIT		1 - 21			······································	Change	Addition
NAME					4. 2 NA							
STREET ADDRESS					1		ADDRESS 1					
CITY-ST-ZIP					4.4 CIT							
TITLE				DELETE	5.1 111		-4"				Change	Addition
NAME					5.2 NAI							
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CIT							
TITLE	 - 		•	DELETE	6.1 TIT						Change	☐ Addition
NAME	+			•	6.2 NAI							
STREET ADDRESS							ADDRESS					

6.4 CITY-ST-7IP

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. Christopher A Smith 01/11/1998 644-8262

FILED

Feb 04 1998 8:00am

Secretary of State