

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000053459 (1)

1. Corporation Name

SC & BR FLORIDA CORPORATION



Principal Place of Business

Mailing Address

9753 WEST SAMPLE RD
CORAL SPRINGS FL 33065
US

9753 WEST SAMPLE RD
CORAL SPRINGS FL 33065
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/20/1994

4. FEI Number

65-0505719

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 10365 WEST SAMPLE RD.

26 10365 WEST SAMPLE RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 CORAL SPRINGS, FL

Zip

24 33065

Country

25 U.S.A.

27 City & State

28 CORAL SPRINGS, FL

Zip

29 33065

Country

30 U.S.A.

g. Name and Address of Current Registered Agent

BONDY, LUIS
9753 WEST SAMPLE RD
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

LUIS BONDY

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

10365 WEST SAMPLE RD.

83

84 City

CORAL SPRINGS

FL

85 Zip Code

33065

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/24/98
DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME BONDY, LUIS
STREET ADDRESS 9753 WEST SAMPLE RD
CITY-ST-ZIP CORAL SPRINGS FL

TITLE DST ☐ DELETE

NAME BONDY, MIRTHA
STREET ADDRESS 9753 WEST SAMPLE RD
CITY-ST-ZIP CORAL SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 10365 WEST SAMPLE RD.
1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 10365 WEST SAMPLE RD
2.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME LUIS MANUEL BONDY
3.3 STREET ADDRESS 10365 WEST SAMPLE RD
3.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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.

CR2E034 (10/97)