

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # P94000065033 (0)

1. Corporation Name

BRANDEL COMMUNICATIONS, INC.

95 MAY -1 PM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/02/1994
3a. Date of Last Report

4. FEI Number 65-0553839
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

2. Principal Place of Business
21 1859 N. PINE ISLAND RD
22 305
23 PLANTATION, FL
24 33322
25 USA
2a. Mailing Address
26 1859 N. PINE ISLAND RD
27 305
28 PLANTATION, FL
29 33322
30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name BRANDEL COMMUNICATIONS, INC
82 Street Address (P.O. Box Number is Not Acceptable) 1859 N. PINE ISLAND RD
83 SUITE #305
84 City PLANTATION FL 85 Zip Code 33322

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

BENJAMIN B. DELEON
BENJAMIN B. DELEON

042695

(Signature of current or former officer or registered agent and date of application)

(NOTE: Registered Agent signature required when instituting)

DATE

12. OFFICERS AND DIRECTORS
11 TITLE b
12 NAME DELEON, BENJAMIN
13 STREET ADDRESS 1859 N. PINE ISLAND RD., #305
14 CITY, ST, ZIP PLANTATION FL 33322
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP
19 TITLE
20 NAME
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46 CITY, ST, ZIP
47 TITLE
48 NAME
49 STREET ADDRESS
50 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE ☐ Change ☒ Addition
12 NAME SUSAN GIFFORD-DELEON
13 STREET ADDRESS 1859 N. PINE ISLAND RD #305
14 CITY, ST, ZIP PLANTATION, FL 33322
15 TITLE ☐ Change ☐ Addition
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP
19 TITLE ☐ Change ☐ Addition
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP
23 TITLE ☐ Change ☐ Addition
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31 TITLE ☐ Change ☐ Addition
32 NAME
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39 TITLE ☐ Change ☐ Addition
40 NAME
41 STREET ADDRESS
42 CITY, ST, ZIP
43 TITLE ☐ Change ☐ Addition
44 NAME
45 STREET ADDRESS
46 CITY, ST, ZIP
47 TITLE ☐ Change ☐ Addition
48 NAME
49 STREET ADDRESS
50 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(b), 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. If I am an officer or director of the corporation or the manager or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, to be an attachment with an address.

SIGNATURE: BENJAMIN B. DELEON
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

04-26-95