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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000025514 (7)

BRENNAN & ASSOCIATES, INC.

Principal Place of Business Mailing Address 9737 SW 92 TERR 9737 SW 92 TERR MIAMI FL 33178 MIAMI FL 33176-1801 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1995 06/17/1996 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0568534 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Z_{00} Yes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ALBERT, DONNA E 3000 NORTHEST 30TH PLACE Street Address (P.O. Box Number is Not Acceptable) SUITE 309 FORT LAUDERDALE FL 33306 83 ŘΔ City Zio 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 land accept the obligations of, Section 607.0505, Florida Statutes. Signarine, typed or printed name of registered agent and tice if applicable (NOTE. Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE Blit BRENNAN, KEVIN 1.2 NAME NAME 9737 SOUTHWEST 92ND TERRACE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 01 1.4 CITY - ST - ZIP CDV - \$1 - Z6 Change Addition DELETE 2.1 TITLE DILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CHY-S1 ZIP 2. 4 C(TY - ST - ZIP DELETE Change Addition 31 TITLE TIILF NAME 3.2 NAME **33 STREET ADDRESS** STREET ADDRESS 34 DITY-ST-ZIP CHY-SI ZIP Change Addition DELETE 4.1 TITLE THLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 71P C-17-S1-71P Change Addition DELETE 5.1 TITLE THE 52 NAME NAME 5.3 STREET ADDRESS STREET ACCESS 5.4 CITY-ST-ZIP City St Zie Change Addition DELETE 6.1 TITLE TRUE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

appears in Block 12 or Block 13 if cha

FILED

Apr 09 1997 8:00am

Secretary of State

14. I do 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 suppliemental 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

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