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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P95000025722 (6)

THE LAW OFFICES OF BARBARA J. BRUSH, P.A.

Principal Place of Business

Mailing Address

524 S ANDREWS AVE

SIGNATURE:

524 S ANDREWS AVE



SUITE 102N FT LAUDERDA	SUITE 102N FT LAUDERDALE FL 33:	. 33301			Date Incorporated or Qu 03/27/1995	alified 3a. Dat	e of Last F	leport	
2. Principal Pluc		2a. Mailing Address	احدم	2100		4. FEI Number	1007		Applied For
21 One F	financial Plaz	a 26 One Finar	rcial	rig	za	62,028,	108 /	60 71	Not Applicable
Suite Vpt. #, etc Suite Vpt. #, etc. 27 27 27 27 27						5. Certificate of Status Desi	ired 🗀	•	5 Additional Required
Orty & State City & State			یم ادا د		<b>—</b> 1	6. Election Campaign Finan	icing $\Box$	\$5.0	0 May Be
23 Ft, La	uderdale, MC	28 FT Laua	erdo	ue,	50	Trust Fund Contribution	Т Ц		d to Fees
୷⋞⋩⋉ ⋐	34 Country	22 \$3394	Coun	ر. ک. لِرُ	<b>A</b> .	This corporation has liab Ftorida Statutes	ility for intangible f ■ Yes □ No	ax under s	199.032,
	9. Name and Address of Cur	and the state of t	1301	<u> </u>		10. Name and Address of		Agent	
				1 Name					
BRUSH, BARBARA J				2 Street	Address	s (P.O. Box Number is Not Ac	cceptable)	<u> </u>	
524 S ANDREWS AVE				One Financial Viaza					٥
SUITE 10				13 (	li uz	12/01/2			
FT LAUD	ERDALE FL 33301		Ĩ	4 City		المدام	_ EI	85 Z	ip Code
11 Discount to	The presidings of Sections 607.0	502 and 607 1508 Marida Statuta	s the about	a named c	rococati	on submits this statement for	the numose of ch	anging its	S 8 Y Y
or registere	d again, or both, in the State of F	502 and 607.1508, Florida Statute lorida. Such change was authorize	d by the co	rporation's	s board	of directors. I hereby accept t	he appointment a	s registered	d agent. I am
familiar with		ection 607,0505, Jorida Statutes.	1,				1-18	-91	, _
SIGNATURE	ignyr are, typical or princed name of registered a		E Registured A	gent signature	recuired w	tien reinstating."	DATE		₽
12.	OFFICERS	AND DIRECTORS	13.		Ţ	ADDITIONS/CHANGES 1			
THEF	D	☐ DELETE	1. 1 TiŤi					Change	☐ Addition
NAM?	BRUSH, BARBARA J	177 40AL	1.2 NAN		20	e Financi	ialPk	iza.	_
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NAM9			62 NAN	IE .					
STREET ADDRESS			63 STH	EFT ADDRESS					
C 1Y+S1+7-P			6.4 City	- ST - ZIP					
14. I do hereby certify that oath; that I	certify that the information suppli- trie information indicated on this a am an officer or director of the co- Block 12 or Birch 13 or benead	ed with this filing is voluntarily furnishmual report or supplemental annular portal on the receiver or trustee or onlian attachment with an additional or the supplement with an additional control of the supplement with a supple	shed and d la! report is emplowere	oes not qu true and a d to execu	ualify for iccurate ute this r	the exemption stated in Secti and that my signature shall he eport as required by Chapter	on 119.07(3)(k), F ave the same lega 607, Florida Statu	orida Statu Leffect as ites; and th	ites. I further if made under nat my name