SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000034782 (9)

BRI-NAT, INC.

APPROVED AND FILED

1997 JUL 30 PN 12: 34

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Deineinet Dies	- of Dunings	Market Addition			 	IT BBIBD IIIII DIFFI INFOLIBLIA ITALI
Principal Place of Business		Malling Address	Mailing Address			
5201 N.E. 14TH TERRACE		5201 N.E. 14TH TERRACE				
SUITE 205 FT. LAUDERDALE FL 33334		SUITE 205 FT. LAUDERDALE FL 33334		DO NOT WRITE IN THIS SPACE		
THE ENDOCHE	nee 12 00007	FI. LAUDERDALE FL 333	3 1		3. Date Incorporated or Qualified	3a. Date of Last Report
					i	1
2 Principal P	ace of Rusiness	2n Mailing Address	2a. Mailing Address		04/28/1995 4. FEI Number	05/01/1996
2. Principal Place of Business						Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0577882	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State				
23		28		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	Zip	Cou	nte.	Trust Fund Contribution	
24	25	<u>├</u> ─┐ `	···	inty	8. This corporation owes or has pai	
[24]	9. Name and Address of Curren	[29] t Registered Agent	30		Personal Property Tax due June 10. Name and Address of New Rec	
200		t trogistion ou regorit		81 Name	10, Name and Address of New Ho	Jisteleu Agelik
DOLAN, MARY LOU				OI HAIR		
5201 N.E. 14TH TERRACE				82 Street A	ddress (P.O. Box Number is Not Acceptab	le)
SUITE 205						
FT. LAUDERDALE FL 33334				83		
				84 City		B5 Zip Code
11 Directions	to the provisions of Sections 607.050	2 and 607 1600. Florida Clated	an the ob	Love Board		FL 63 Zip 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, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	Ağusi sığılaldır.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	DELETE	1.1 10	IF T	ABOTTONO/OFFANGES TO OFFIC	Change Addition
NAME	DOLAN, MARY LOU		1.2 NA			
STREET ADDRESS	FACA NET ANTIL TENDA OF HOOF					
	FT. LAUDERDALE FL 33334	200		REET ADDRESS		!
CITY-ST-ZIP TITLE	D	DELETE		Y-ST-ZIP		Observe To Addition
1 1	DOLAN, ROBERT J		2.1 1)1			☐ Change ☐ Addition
NAME		Mr.	2.2 NA			
STREET ADDRESS	5201 N.E. 14TH TERRACE, #2	200	2.3 S1	REET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL 33334		2.4 CI	TY-ST-ZIP		
TITLE		☐ DELETE	3.1 T(T	LE .		Change Addition
NAME			3.2 NA	ME (,	. 1000022	2575418
STREET ADDRESS			3.3 \$1	REE1 ADDRESS	-08/05/	2575418 9701012006 5.00 ****165.00
CITY-ST-21Pe			3.4. CI	TY-ST-ZIP		5.00 ***165.00
TITLE		☐ DELETE	4.1 TIT	LE		Change Addition
NAME			4. 2 N	ME		
STREET ADDASS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP		
TITLE		DELETE	5.1 TIT		755.600	Change Addition
NAME			5.2 NA	i i		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	5.4 UI			Change A Addition
NAME			1			C outside Vin Vool((0))
			6.2 NA			160 m
STREET ADDRESS				REET ADDRESS	5/13017	
CITY-ST-ZIP			■ 64 CII	Y-ST-7IP		, ((oo ,

I do hereby certify that the information supplied with this filling 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 of changed great mattachment with an address.



Florida Dept. Of State Divisions of Corporations P.O. Box 6327 Tallahassee, Florida, 32314

7/22/97

Secretary of State

Yesterday, 7/21/97, I received the "1997 Profit Corporation Annual Report Form", and it was stamped "2nd NOTICE". Today, 7/22/97, I called your office (904-487-6056) and spoke with a women by the name of Cheryl. After I explained to her theat I never did receive the first form, she advised me to complete the form, mail it in to your office with a check in the amount of \$165.00, not the \$550.00 as indicated on the form and to write this letter explaining I never did receive the first form.

Thank you,

Robert J. Dolan, VP BRI-NAT, Inc.