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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043969 (1)

BROWELL INDUSTRIES, INC.

Principal Place of Business

Mailing Address

APPROVED AND FILED

1997 HAY -1 PH 1: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

3480 COLONNADE DR. TALLAHASSEE FL 32308		3480 COLONNADE DR. Tallahassee FL 32308-3295								
						3. Date Incorporated or Qualified 06/07/1995	3a. Date 09/06	of Last R /1996	leport	
2. Principal Place of Bus	iness	2a. Mailing Address				4. FEI Number		Ar	oplied For	
21		26				59-3319210			ot Applicable	
Surfe, Apt. #. etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required				
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28}				Trust Fund Contribution Added to Fees				
Zψ	Country	Zip	Cou	intry		· · ·	This corporation has liability for intangible tax under s. 199.032,			
9. Name and Address of Curre		29	30				Yes No			
		t Hegisterea Agent		B1	Name	10. Name and Address of New Re	gistered Age	9111		
	STUART E ESQ.			01	Name					
211 EAST VI			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)				
TALLAHASSE	E FL 32301				ļ					
				83						
				84	City	····	1	35 Zip	Code	
							<u> FL</u>			
 Pursuant to the provi office or registered a agent. Lam familiar v 	sions of Sections 607.050 gent, or both, in the State vith, and accept the obliga	2 and 607.1508, Florida of Florida. Such chang ations of, Section <mark>607.0</mark> 5	i Statutes, the al e was authorize 505, Florida Stat	bove d by lutes	e-named cor the corpora s.	rporation submits this statement for the patients board of directors. I hereby acceptation's	urpose of chat the appoin	anging it tment as	ts registered registered	
SIGNATURE	of or printed name of registered age									
12.	of printed name of registered age OFFICERS ANI		(NOTE: Registere	d Age	rit signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DECTOR	10 IN 10	
	OF FIGURE AIN	DELL		T) E				Change	Addition	
INLE PI	ELL, PATRICIA A				, ,	resident and CEO	¥.	Gliange	L.J Muulion	
	OLONNADE DRIVE		1.2 N/		1					
741141					ADDRESS					
	IASSEE FL 32308	T DELL			T-ZIP			r 	······································	
THE SVP	TED ADMITTA	DELI			1		L	Change	Addition	
	TER, AGNETA		2.2 N/		,					
	DSTONE RD		2.3 \$1	REET	ADDRESS					
	DALE NY				ST-ZIP			r		
TITLE VP	DI 4141	DELI	•					Change	Addition	
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	46TH STREET		3.3 \$1	REET	ADDRESS	-05/06/	9701	115	007	
	ORK NY 10017				ST-ZIP	****16	5.00		65,00	
11"[[DELI			l		L	Change	Addition	
NAME			4.2 N		}					
STREET ADORESS			4.3 \$1	REET	ADDRESS					
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11715		☐ DELI	1		}		L.	Change	Addition	
NAME			5.2 N		1					
STREET ACTURESS					ADDRESS					
CITA 21 Te					T- ZIP			···		
THEF		☐ DELI	1				L	Change	Addition	
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SIBLET ADDRESS			6.3 S	REET	address		!	~ (ZM, , ,	
Cd t - S1 ZIP			640						ν'	
 I do hereby certify the information incocated 	at the information supplied Lon this annual report or s	d with this filing does no applemental annual rer	ot qualify for the	exe	mption state	ed in Section 119.07(3)(I), Florida Statute at my signature shall have the same lega	s. I further ca	rtify that	the	

SIGNATURE:

MATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/97 894-19 M