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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000062472 (2)

BRITO & COMPANY, INC.

FILED Jun 03 1997 8:00am Secretary of State



| | | | | | | | | | |
|--------------------------------|---|--|---|-----------------------------|------------------|--|--------------------------------------|---------------------------|-----------------------|
| Principal Plac | e of Business | Mailing Addres | | | | 1 182(182(1)5 1010) 5111 5811 5811 | (44() 0 01119 | 61814 14811 | |
| 9971 8W 142 / MIAMI FL 3318 | | | 12671 SO, DIXIE HWY. Miami FL 33156-5831 | | | | | | |
| | | | | | | 3. Date Incorporated or Qualified 08/14/1995 | 3a. Date o | | eport |
| 2. Principal P | lace of Business | 28. Mading Ad | dress | | | 4. FEI Number 65 06 | 21584 | AF | plied For |
| 21 | | 26 | | · | | APPLIED FOR | | | t Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. | #, etc. | | | 5. Certificate of Status Desired | □ \$ | 8 8.75 A Fee Re | Additional equired |
| City & State | е | City & State | ? | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | Added t | o Fees |
| Zip | Country | Zip | <u> </u> | Country | | 8. This corporation has liability for | | | . 199.032, |
| 24 | 9. Name and Address of | 29 Current Registered Agent | | 10 | | florida Statutes L. 10. Name and Address of New Re | Yes L N | | |
| CAE | RILLO, FRANK | y de la constant de l | · | 81 | Name - | | | ··· | |
| | 3 SW 8 STREET SUITE 214 | 4 | | 00 | O | PETER BRITE | | | |
| | MI FL 33135 | • | | 82 | Street Add | dress (P.O. Box Number is Not Acceptable 7 / 50 DIX/E | Pw V | | |
| | ini i B oo ioo | | | 83 | | 7, 00 0,7,70 | | | |
| • | | | | - | | | | | |
| , | | ^ | | 84 | City M | IAMI | | 5 ZB | Code 3) Sb |
| 11> Pursuant | to the provisions of Sections | 07.0507 and 607.1508, Flo | rida Statutes | , the above | named co | rporation submits this statement for the patients board of directors. I hereby acceptation's board of directors. | ourpose of cha | anging it | s registered |
| office or r | registered agent, or both, in the im familiar with, and accept to. | State Of Florida. Such cha obligations of, Section 60 | ango was aut 7.0505. Florid | thorized by da Statutes. | the corpora | ation's board of directors. I hereby accer | ot the appoint | ment as | registered |
| SIGNATURE | - cold | W. | | | | | | | |
| SIGNATORE | Signature, lyped or printed name of regis | lered agent and little if applicable | (NOTE) | Registered Agen | l signature requ | aired when reinstating) | DATE | | |
| 12. | | RS AND DIRECTORS | | 13. | | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE | PD POTTO | Ц | DELETE | 1 1 TITLE | - 1 | | Ш | Change | ☐ Addition |
| NAME | BRITO, PETER | | | 1.2 NAME | | | | | |
| STREET ADDRESS | 12671 S DIXIE HWY MIAMI FL 33156 | | | 1.3 STREET A | | | | | |
| CITY-ST-ZIP | MINMI PL 33130 | | DELETE | 1.4 CITY - ST | ZIP | | | Obenda | 4.4400.00 |
| TITLE | | | JELE IE | 2 1 111LE | Ì | | | Change | |
| NAME | | | | 2.2 NAME | DDDI OO | | | | |
| COTY OF THE | | | | 2.3 STREET A 2 4 OITY-ST | | | | | |
| CITY-ST-ZIP TITLE | | | DELETE | 3.1 TITLE | - 211 | | | Change | Addition |
| NAME | | | | 3.2 NAME | | | _ | 3- | |
| STREET ADDRESS | | | | 3.3 STREET A | DORESS | | | | |
| CITY-ST-ZIP | | | | 34. CITY - S1 | ì | | | | |
| TITLE | | | DELETE | 4 1 TITLE | | | | Change | Addition |
| NAME | | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | | 4.3 STREET A | DORESS | | | | |
| CITY-ST-ZIP | | | | 4.4 CITY - ST | ZIP | | | | |
| TITLE | | | DELETE | 5.1 TITLE | -1- | | | Change | Addition |
| NAME | | | | 5.2 NAME | - } | | | | |
| STREET ADDRESS | | | | 53 STREET A | ODRESS | | | | |
| CITY-ST-ZIP | | | | 5.4 CITY - ST | ZIP | | | | |
| TITLE | | الل | DELETE | 6.1 TITLE | | | Ц | Change | Addition |
| NAME | | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | G.3 STREET A | - 1 | | | | |
| CITY-ST-ZIP | but north, that the information | upplied with this tile. | ا السيم امم | 64 CITY-ST | | of in Coaling 110 07/0/// Classes | a d'Elighia | .Cf . O | 41- |
| informatio | by certify that the information s on indicated on this annual repr | ort or supplemental ognual | rep y t is true | ior me exen e and accur | ate and the | ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S | s. i juither de il effect as if r | any mat nade una | ine der oath; tha |
| laman o iassedas | fficer or director of the corpora in Block 12 or Block 13 if char | tion or the receiver or rust | ee Inpower | red to execu ess. | te this repo | ort as required by Chapter 607, Florida S | itatutes; and t | hat my n | ame |
| -Ph | | | 7 | | | | | | |