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. Morthani

Secretary of State

DIVISION OF CORPORATIONS

P95000065048 (7) DOCUMENT

BNR ENTERPRISES, INC.

Principal Place of Business	Mailing Address
6450 NORTH WICKHAM ROAD	6450 NORTH WICKHAM ROAD
MELBOURNE FL 32940	Melbourne FL 32940
US	US

FILED Aug 26 1997 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 08/21/1995 04/18/1996 2. Principal Place of Business 2a. Mailing Address 26 8138 Applied For 26 59-3371797 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 EDWARD B. GALANATE, P.A. 789 S FEDERAL HWY 82 SUITE 103 83 STUART FL 34994 84 CIPORT ST LICIO Ad 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered florida, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered on \$1.000.000 per control to \$1.000.0000 per control to \$1.000.000 per control to \$1.000.000 per control to \$1.000.0000 per control to \$1.000.00000 per control to \$1.000.0000 per control to \$1.00000 per control to \$1.00000 per control to \$1.00000 per control to \$1.00000 Pursuant to the provisions of Sections office or registered agent, or both, in SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Aqulla, KAmon AGUILA, RAMON NAME 1.2 NAME BAYSHORE BLVD STREET ADDRESS 1.3 STREET ADDRESS PORT ST. LUCIE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change MILTON, BRYANT M. NAME 2.2 NAME RESERVE COUNTRY CLUB STREET ADDRESS 2.3 STREET ADDRESS PORT ST. LUCIE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

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 angual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the obspication or the receive of trusteer of trusteer of trusteers. In Block 12 or Block 12 o

CIGNATURE

561-4890805