FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000067005 (5)**

1. Corporation Name

BRAKE KINGDOM, INC.

Principal Place of Business	Mailing Address
12440 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161	12440 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161

3. Date Incorporated or Qualified: 08/29/1995
3a. Date of Last Report:
4. FEI Number: 65-0608031 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 19000 west DIXIE HIGHWAY	26 19000 west DIXIE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: N. M. B FL	28 City & State: N. M. B FL
24 Zip: 33180 25 Country: USA	29 Zip: 33180 30 Country: USA

9. Name and Address of Current Registered Agent

ZVI, OFER
12440 WEST DIXIE HIGHWAY
NORTH MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name: ZVI DAVID
82 Street Address (P.O. Box Number is Not Acceptable): 19000 west DIXIE HIGHWAY
83
84 City: N. M. B FL 85 Zip Code: 33180

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] DAVID ZVI 5/7/96
Signature, typed or printed name of registered agent, and title if applicable — NOTE: Registered Agent signature required for annual reporting — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ZVI, DAVID 12440 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☑ Change ☐ Addition PD ZVI DAVID 19000 west DIXIE HIGHWAY N. M. B FL 33180
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ZVI, OFER 12440 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☑ Change ☐ Addition TD ZVI OFER 19000 west DIXIE HIGHWAY N. M. B FL 33180
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition 000001881600 -05/21/96--01039--025 ***200.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 5-7-96 JR

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] (OFER ZVI) 4/25/96 305 9332882
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #