

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

FILED

97 JUL 23 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000067005 (5)

1. Corporation Name

BRAKE KINGDOM INC.

Principal Place of Business

Mailing Address

19000 WEST DIXIE HIGHWAY
NORTH MIAMI BCH FL 33180

19000 WEST DIXIE HWY
N.M.B FL 33180-2638

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

8/29/1995

3a. Date of Last Report

05/01/1996

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZVI DAVID
19000 WEST DIXIE HWY
N.M.B FL 33180

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

508802251385-2
-07/29/97-01105-026
***165.00 ***165.00
FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ZVI DAVID
STREET ADDRESS 19000 WEST DIXIE HWY
CITY-ST-ZIP N.M.B FL 33180

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE TD
NAME ZVI OFER
STREET ADDRESS 19000 WEST DIXIE HWY
CITY-ST-ZIP N.M.B FL 33180

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/97

305 9332882

CR2E034 (9/96)

TO: FLORIDA DEP'T OF STATE
RE: DOC#P 95000067005 (5)
FROM: BRAKE KINGDOM, INC.
DATE: JULY 7, 1997

WE JUST RECEIVED YOUR APPLICATION, TODAY JULY 7, 1997. I WILL HAVE A
CHECK SENT OUT TO YOU TODAY. FYI, I NEVER RECEIVED ANYTHING PRIOR TO THIS
APPLICATION, THEREFORE YOU NEVER RECEIVED ANYTHING FROM ME. I HOPE THIS
WILL NEVER HAPPEN AGAIN, AND IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO
CALL 305-933-2882.

OFER ZVI *[signature]*

ATT: *[initials]* AMY ALAN.