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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000069027 (7)

BROOKLYN'S FINEST, INC.

14. Thereby certify that the information supplied with indicated on this annual report or supplemental officer or director of the corporation or the received Block 12 or Block 13 if changed, or on a lattacker.

SIGNATURE:

Principal Place of Business Mailing Address

FILED Apr 14 1998 8:00am Secretary of State



4651 BABCOCK ST. N.E., UNIT 3 PALM BAY FL 32905		4651 BABCOCK ST. N.E PALM BAY FL 32905	4651 BABCOCK ST. N.E., UNIT 3 PALM BAY FL 32905		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 09/05/1995	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	Applied For
21		26	26		59-3338578	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
— ^{Zip}	Country	Zip	Countr	y	8. This corporation owes or has paid the	current year Intangible
24	25	29	30]		Personal Property Tax due June 30.	☐ Yes ☐ No
9, Name and Address of Current Registered Agent				10, Name and Address of New Registered Agent 81 Name		
TOUMA, DAVID			61	Name		
4851 BABCOCK ST. N.E., UNIT 3 PALM BAY FL 32905			82		dress (P.O. Box Number is Not Acceptable)	
			83			
			84	City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
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			ent signature requ	ulred when reinstating) DAT	
12.	OFFICERS	AND DIRECTORS DELETE	13.	- 1	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
	TOURIS BALEN		1.1 TITLE			Change L Audklon
NAME	4851 BABCOCK ST. N.E.,	LIMIT 9	1.2 NAME	* *******		
STREET ADDRESS	PALM BAY FL 32905	OMI 3		T ADORESS		
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY- 2.1 TITLE	\$1-ZIP		Change Addition
NAME	TOUMA, DENISE M		2.2 NAME			C charge C hooken
STREET ADDRESS	4651 BABCOCK ST. N.E.,	UNIT 3		T ADDRESS		
CITY-ST-ZIP	PALM BAY FL 32905	5.0.7 5	2. 4 CITY-			
TITLE	111201 0717 12 02000	☐ DELETE	3.1 TITLE	01-EIL		Change Addition
NAME		-	3.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY+ST-ZIP			3.4. CITY-			
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			• —
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		,
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		<i>}</i>
AUTH OT THE				77 715		*

fualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath, that I am an ered to execute this port as required by Chapter 607, Florida Statutes; and that my name appears in

407)913-40