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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P95000073775 (5)

BRIGGS 2, INC.

Principal Place of Business

Mailing Address

3056 SE MIMOSA STREET

## **FILED** Jan 29 1998 8:00am Secretary of State



STUART FL 3			STUART FL 34997						
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								09/22/1995	
2. Principal Pl	tace of Business	2a. M	2a. Mailing Address				4. FEI Number Applied For		
21			26					<b>59-3337896</b> Not Applicable	
Suite, Apt. #, etc.			<del></del>	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
22			27					5. Certificate of Status Desired Fee Required	
City & State			<del></del>	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23				Zip Country					
Zip					<del></del>	Country  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24 25 29				20 30				10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent DALE, MICHAEL L ESQUIRE						81 Name			
DALE, MICHAEL & ESQUIRE 5154 SE FEDERAL HWY									
			82			Street /	t Address (P.O. Box Number is Not Acceptable)		
STUART FL 34997					+	83			
						~			
}						84	City	FL 85 Zip Code	
			0500 4 007	1500 Florido Statut		1	namad		
11. Pursuant i	to the provisions egistered agent	s of Sections 607.1 , or both, in the St	usuz and 607. late of Florida.	Such change was	es, the ab authorized	l by	the corp	orporation's board of directors. I hereby accept the appointment as registered	
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									
	Signature, typed or pr		AND DIRECTO		13.	Ager	nt signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	Р	OFFICERS	AND DILLOTC	OELETE	1.1 10	LE		Change Addition	
NAME	BRIGGS, JI	EREMY			1.2 NA				
STREET ADDRESS	3056 SE M						ADDRESS		
1	STUART FL				1.4 CIT			34997	
CITY-ST-ZIP TITLE	VP			DELETE	2.1 TIT			Change Addition	
NAME	BRIGGS, K	AREN		22 N				<b>X</b> -	
'	3056 SE MIMOSA ST.						ADDRESS		
STREET ADDRESS						. 4 CITY-ST (ZIP)		34997	
CITY-ST-ZIP TITLE	0.0,00			DELETE	3.1 TIT			☐ Change ☐ Addition	
NAME					3,2 NAI				
STREET ADDRESS							ADDRESS		
'					3.4. CI				
CITY-ST-ZIP TITLE				DELETE	4.1 TIT		(-1414	Change Addition	
NAME					4.2 NA				
STREET ADORESS							ADDRESS		
CiTY-ST-ZIP					4,4 CIT				
TITLE				DELETE	5.1 TIT	_		Change Addition	
NAME				_	5,2 NA				
STREET ADDRESS							ADDRESS		
					5.4 CIT				
CITY-ST-ZIP TITLE				DELETE	6.1 TIT	******	411	Change Addition	
NAME					6.2 NA			•	
( · · · · ·						-	ADDRESS		
STREET ADDRESS									
CITY-ST-ZIP	L				6.4 CIT	1-5	-ZIP		

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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.

561-221-2145