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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000083177 (2)

BRAZILIAN COURT MANAGEMENT, INC.

Principal Plac	e of Business	Mailing Address					idi ildir idəli i		
777 SOUTH FLAGLER DR. SUITE 100 EAST W PALM BEACH FL 33401		197 FIRST AVENUE NEEDHAM MA 02194-2812							
					Date Incorporated or Qualified 10/30/1995	1	le of Last R 1/1996	oport	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		F	oplied For	
Suite, Apt. #, etc.		[26]			65-0617295			ot Applicable	
→ . '' ' '		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State		City & State			6. Election Campaign Financing		\$5.00		
23		28			1 Trust Fund Contribution		Added !		
ø Zip	Country	Zip			8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30		Florida Statutes	Yes [] No		
	9. Name and Address of Curre	nt Registered Agent		т	10. Name and Address of New F	tegistered A	gent		
VALO	es-fauli corporate servi	CES, INC.	81	Name					
	SOUTH FLAGLER DRIVE		82	Street	Address (P.O. Box Number is Not Accept	able)	****		
	E 500 EAST		83						
W PA	ALM BEACH FL 33401		"						
			84	City		FL	85 Zip (Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	les, the abov	e-named	d corporation submits this statement for the poration's board of directors. I hereby acc		L L changing it	s registered	
office or r agent. I a	egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was gations of, Section 607.0505, F	authorized b Iorida Statute	y the cor s.	poration's board of directors. Thereby acc	ept the appo	intment as	registered	
SIGNATURE					,				
Signature, typed or printed name of registered agent and title if applicable (NOTE:				ent signatur	o required when reinstating)	DATE			
12.		ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF		☐ Change	Addition	
NAME	PDT Gosman, andrew D	L DEEC 15	1.2 NAME			ŀ	Orientige	L_ Nadition	
STREET ADDRESS	197 FIRST AVENUE		1.3 STREET ADDRESS						
CITY-ST-ZIP	NEEDHAM MA 02194		1.4 CITY-		}				
TITLE	DVS DELETE		2.1 TITLE			7	Change	Addition	
NAME			2.2 NAME	:2 NAME					
STREET ADDRESS	197 FIRST AVENUE		2.3 STREET ADORESS						
CITY-ST-ZIP	NEEDHAM MA 02194		2. 4 CITY-S1-ZIP						
TITLE	AS	·			45	l	Change	Addition	
NAME	ZERMARI, RICHARD		3.2 NAME		Richard Termani 187 First AVE NEathain, not 02194				
STREET ADDRESS	101 1 11101 11101		1	1 ADDRESS	SS 197 7187 AVE				
CITY-ST-ZIP TITLE	NEEDHAM MA 02194	DELETE	3.4 CITY- 4.1 TITLE	ST-ZIP	Nearman, MA OUT 1		Change	Addition	
NAME		□ pttr./r	4 2 NAM			•	Onlings	Addition .	
STREET ADDRESS				T ADDRESS	· ·				
CITY-ST-ZIP			4.4 CiTY-						
TITLE			5.1 TITLE		 		Change	Addition	
NAME			5.2 NAME		1				
STREET ADDRESS			5.3 STREE	1 ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TITLE	-	☐ DELETE	6.1 THLE				Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			0.3 STREE	T ADDRESS	1			ì	

Stable De Ly College Richard P. Zermani Willia Carolina

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), Fir da 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 to same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name