

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 AUG 11 PM 2: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000038725 (3)

1. Corporation Name
BRACKETT ENTERPRISES, INC.

Principal Place of Business 6791 PARK BLVD. PINELLAS PARK FL 34666	Mailing Address 6791 PARK BLVD. PINELLAS PARK FL 34666
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2. Principal Place of Business 21 840-23rd Ave North 22 Suite, Apt. #, etc. 23 City & State St. Petersburg Fla. 24 Zip 33704	2a. Mailing Address 26 840-23rd Ave North 27 Suite, Apt. #, etc. 28 City & State St. Petersburg Fla. 29 Zip 33704
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3. Date Incorporated or Qualified 05/03/1996	3a. Date of Last Report
4. FEI Number 59-3264674	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

ESTEP, MARY K
4500 9TH STREET NORTH
ST. PETERSBURG FL 33703

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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

TITLE	D	<input type="checkbox"/> DELETE
NAME	ESTEP, MARY K	
STREET ADDRESS	4500 9TH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BRACKETT, MILTON N	
STREET ADDRESS	4500 9TH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	500002269705--1
2.4 CITY-ST-ZIP	-08/18/97--01086--001
3.1 TITLE	***165.00 ***165.00
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

MARY K ESTEP

8/22/97

CR2E034 (4/97)

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BRACKETT ENTERPRISES, INC.

840 23RD AVENUE NORTH
ST. PETERSBURG, FL. 33704
(813) 898-4099

July 25, 1997

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATION
Attn: Annual Reports
P.O. Box 6327
Tallahassee, Fl. 32314

In re: EIN: 59-3264674

Dear Sirs:

This is to inform you that the 1997 Corporation Annual report was mailed to a wrong address. My address was 4500 9th Street North, St. Petersburg, Fl. 33703. It is on the inside of the annual report. It was not mailed to that address.

Inadvertently, my annual report dues were not paid on a timely manner. This is a request to waive the LATE PENALTY CHARGE and to accept my check #286 in the amount of \$165.00 for the annual report for 1997.

Please note that I have a new address:

840 23rd Avenue North
St. Petersburg, Fl. 33704

Please send future correspondence to the above address.

Should you have any questions please call me at (813) 898-4099.

Thank you for your assistance in this matter.

Sincerely yours,

Mary K. Estep
Mary K. Estep