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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000054030 (7)

MARK W. BRANDEL, INC.

Principal Place of Business

Mailing Address

FILED May 08 1997 8:00am Secretary of State



2525 NE 1316T LANE OKEECHOBEE FL 34972		2525 NE 131ST LANE OKEECHOBEE FL 34972	2525 NE 131ST LANE OKEECHOBEE FL 34972-8544					
					3. Date Incorporated or Qualified 06/24/1996	3a. Date of La	st Report	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			65-0680827		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27					5. Certificate of Status Desired		5 Additional Required	
City & Stat	te	City & State			Election Campaign Financing Trust Fund Contribution	\$5.	00 May Be led to Fees	
Zip 24	Country 25	Zip 29	Count	ry	8. This corporation has liability for i			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
BRA	WDEL, MARK W		8	1 Name				
2525 NE 131ST LANE			8	2 Street Add	dress (P.O. Box Number is Not Acceptable)			
» UNE	EECHOBEE FL 34972		8	3	**************************************			
			8	4 City		FL 85	Zip Code	
11. Pursuant office or agent. I a	100.		<u></u>			urpose of changing the appointment	ng its registered t as registered	
12.	Signature, typed or printed name of registered as			gent signature requ	ried when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	TODO (1) 40	
TITLE		ND DIRECTORS DELETE	13, 1.1 Title	T_	ADDITIONS/CHANGES TO OFFIC	Char		
NAME	PRESIDENT	-						
•	MARK W. BRAND	it in	1.2 NAM					
STREET ADDRESS	2525 NE 1315		1	E1 ADDRESS			Į.	
CITY-ST-ZIP TITLE	OKEECHOBEE, 7	L 34972	1.4 CITY			Char	ige Addition	
			2.1 1111.6			🗀 🕬	ge [_] Augulion	
NAME			2.2 NAM	•				
STREET ADDRESS	[ET ADDRESS	•			
CITY-ST-ZIP		DELETE	2.4 GHY 3 1 THU	- \$1 · 71P		Char	nge	
NAME		_ Derrie	3.2 NAM			Ona	ge LJ Adomon	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CHY 4.1 TITLE			Char	nge Addition	
NAME		C) bettere				L. Dilai	go El Manton	
			4. 2 NAA					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		DELETE	4.4 City			Char	nge	
TITLE	•	LJ DICCIE	5.1 1111.6	j			Ge L'I MOUITOIT	
NAME			5.2 NAM	i			İ	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			5.4 DITY	~ 		——————————————————————————————————————		
TITLE		☐ DELETE	61 1 111LE	1		L Char	nge L_ Addition	
NAME			62 NAM	I			ļ	
STREET ADDRESS			6 3 BTRI	ET ADDRESS				
- CITY-ST-ZIP			6.4 D/TY					
14 do horo	by partify that the information rupoli	ad with this filing close not cut	ality for the o	comption state	d in Section 119 07(3)(i) Florida Statuta	 I further confifu. 	that the	

Information indicated on this annual report or supplementar 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 trustoc emperated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged or or attachment with a address.

CICNIATUDE.

3-31-9