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 # P96000062226 (1)

BRODY BROTHERS 1, INC.

FILED Jan 21 1998 8:00am Secretary of State

BHOUT	שאטואבאס ז, ואט.						
Principal Plac	e of Business	Mailing Address				- 1) AND REPORT IN A COLUM MONTH MONTH MONTH AND THE BRITA DESIGN DESIGN DESIGN STORE STATE BOTH AND THE STATE OF THE STATE STATE STATE OF THE STATE S	
530 N.E. 57TH STREET 530 N.E. 57TH STREET							
MIAMI FL 33137 MIAMI FL 33137						DO MOTAMOITE IN THE ORACE	
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
9 Principal P	face of Business	2a. Mailing Address				07/25/1996 4. FEI Number Applied For	\dashv
21 530 NE 57M St. 26 SAME						65-07 18604 Not Applied For	-
Sulte, Apt	Suite, Apt. #, etc.				S9 75 Additional	~	
22		27				5. Certificate of Status Desired Fee Required	1
City & State	θ	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23 MIA	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip Country				8. This corporation owes or has paid the current year Intangible	
24 331	37 25 USA	29 30				Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Registered Agent	\Box
BR	ODY, BENJAMIN			81	Name		
530 NE 57 ST				82	Street Addre	ess (P.O. Box Number is Not Acceptable)	\dashv
· MIA	VMI FL 33137						
			-	83			ł
			F	84	City	85 Zip Code	-
						<u> </u>	
11. Pursuant i	to the provisions of Sections 607.0502 egistered agent, or both, in the State i	2 and 607.1508, Florida Statu of Florida, Such change was	tes, the ab authorized	ove-	named corpo	pration submits this statement for the purpose of changing its registered	t
agent. I a	m familiar with, and accept the obliga	ations of Section 607.0505, F	lorida Statu	utes.	co.polato	on's board of directors. I hereby accept the appointment as registered	
SIGNATURE							_]
	Signature typed or printed name of registered agen OFFICERS AND			Agen	t signature required		!
12.	PTD OF FICENS AND	DELETE	13.	ı F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u></u>
NAME	BRODY, BENJAMIN		1.2 NAI				<u> </u>
STREET ADDRESS	530 N.E. 57TH STREET		1.3 STREET ADORESS		thoness.		
CITY-ST-ZIP	MIAMI FL 33137		_ · ·				- [
TITLE	VSD			1.4 CITY - S1 - ZIP 2.1 TITLE		Change Addition	ᆔ
NAME	BRODY, JESSE			2.2 NAME			Ĩ
STREET ADDRESS	530 N.E. 57TH STREET		2.3 STREET ADD		ODRESS		
City-St-ZiP MIAMI FL 33137			2. 4 CITY - ST - ZIP		l		
TITLE		DELETE	3.1 TITLE			☐ Change ☐ Addition	Jn
NAME			3 2 NA				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			3.4. CIT				
TITLE		☐ DELETE	4 1 7171		-"	Change Addition	n
NAME			4 2 NA			· -	-
STREET ADDRESS					ADDRESS		-
CITY-ST-ZIP			4.4 CIT				
TITLE		DELETE	5.1 TITE			Change Addition	ņ
NAME			5.2 NA	ME	1		1
STREET ADDRESS					.DDRESS		-
CITY-ST-ZIP			5.4 C/T				
TITLE		DELETE	6.1 THT			Change Addition	n
NAME			6.2 NA	ME			
STREET ADDRESS					.DDRESS		
CITY-ST-ZIP			6.4 CIT				
	partification information according with	th this filing close not qualify t	_			Section 119 07/3Vi). Florida Statutes, I further certify that the information	-

14. I 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.

2 2

1/6/98

1205) 868-9188