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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State • DIVISION OF CORPORATIONS

DOCUMENT # **P96000062719 (5)**

TWO BROTHERS OF MIAMI, INC.

Principal Place of Business Mailing Address 3047 SW 38TH COURT 3047 SW 38TH COURT MIAMI FL 33146 MIAMI FL 33148-1504 3. Date Incorporated or Qualified 3a. Date of Last Report 07/17/1996 2. Principal Place of Business 4. FEI Number 65 - 069 - 1516 2a. Mailing Address Applied For 3031 SW 38th 26 3031 5.W38TO CT Not Applicable Suite Apt. # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required MIMMI City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 454 Yes No 25 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NATINSKY, LAWRENCE Scorro 1390 S DIXIE HIGHWAY SUITE 1203 82 ess (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 83 84 11. Pursuafit 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. Lam familiar with land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Pies 1.1 TITLE Change Addition Thungs A. Scotto 3031 SIN 38 CT NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33146 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE THILE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY-SI-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-51-70 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STRUE! ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE THEF 61 TITLE Change Addition

62 NAME

14. I do hercry 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

6.3 STREET ADDRESS

64 CHTY-ST-ZIP

information indicated on this annual report or supplemental annual report is frue 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:

STREET ADDRESS

Offy-ST-ZIP

July 12 12 14 POTTINE

1/10/97 (305) 444-9298

FILED

Feb 27 1997 8:00am

Secretary of State