2002	UNIFO	RM BU:	SINESS R	EPOR	T (UBR	t)	} }	FILEU) T	
2002 UNIFORM BUSINESS REPORT (IDOCUMENT # P96000070109 1. Entity Name A & BROTHERS, INC.								02 AUG -5	PM 2: US	. 1 3.00
Principal Place of Business 7540 SW 134TH COURT MIAMI FL 33183			7540 SW 134TH MIAMI FL 33183							
Suite, Apt. #, etc. Suite, Apt. #, etc. #202					142 <u>5</u>	<u>+</u>	DO NOT WRITE IN THIS SPACE A FEI Number			
City & State	M, F	081dA.	City & State M(AM)	City & State MIAMI Flour da			4. FEI Number 65-0693194		No	t Applicable
202-17	2.6 , Co	untry	23186		County	Q====	5.;Certificate_of_S	tatus Desired	\$8.75 Add	itional
	6. Name and	Address of Curre	ent Registered Agent				7. Name and Add	iress of New Register	ed Agent	
ALEGRIA, DANIEL 7540 SW 134TH COURT MIAMI FL 33183					Street	DAN 280	O Sw	LEGRI Ngranceptable Hoe	et # 2	
SIGNATURE .	Signature, typed or printoration is eligible	at name of registronial		(NOTE: Re		registere	d agent, or both, in then reinstating)	4/29/		O May Be
(See criteria on back) Make Check Payable					to Department		3	und Contribution.	_ /	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALEGRIA, DANI 7540 SW 134TI MIAMI FL 3318	EL H COURT	ND DIRECTORS	elete 	12. TITLE .NAME .STREET ADDRESS CITY-ST-ZIP	· ·	ADDITIONS/CH/	ANGES TO OFFICERS /	Change	Addition
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TITLE				elete	TITLE				☐ Change	☐ Addition

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

13.71 hereby certify that the information supplied with this filing loss not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment withan address, with all other like empowered. CEnture 4

4/29/002