## 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 # P96000075238 (1)

BREVARD KITCHEN & BATH, INC.

Principal Place of Business	Mailing Address
3715 EAST RAILROAD AVENUE COCOA FL 32926	3715 EAST RAILROAD AVENUE COCOA FL 32926

## FILED Feb 17 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

290-9B

8886-159 COP

						09/10/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
1		26				59-3396359		Not Applicat
Suite, Apt.	#, etc	Suite, Apl. #, etc. 27				5. Certificate of Status Desired		75 Additional e Required
City & State	е	City & State			· · · · · ·	Election Campaign Financing     Trust Fund Contribution		00 May Be
Zıp	Country	Zip	h	ountry		6. This corporation owes or has paid the		
<u> </u>	25	29	30			Personal Property Tax due June 30.	Yes	□ No
	g. Name and Address of Current R	egistered Agent		+		10. Name and Address of New Registere	d Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301			81	Name				
			82 Street Address (P.O. Box Number is Not Acceptable)					
				83				
				84	City		85	Zip Code
				<u> </u>		poration submits this statement for the purpose		
SIGNATURE	m familiar with, and accept the obligatio					tion's board of directors. I hereby accept the a		
12.	OFFICERS AND D	IRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
ITLE	PSTD	DELETE	1.1	TITLE			☐ Char	nge Additi
NAME .	SANNICANDRO, VINCENT A		1.2 (	NAME				
TREET ADDRESS	3715 EAST RAILROAD AVENUE		1.3 \$	STREET	ADDRESS			
ITY-ST-ZIP	COCOA FL 32926		1.40	CITY-S1	T-ZIP			
ITLE		DELETE	211	TITLE			Char	nge 🔲 Additi
IAME			2.21	NAME				
TREET ADDRESS			2.3 5	STREET	address			
CITY-ST-ZIP			2.4	CITY-S	ST-ZIP			
TITLE		DELETE	317	TITLE			☐ Chan	nga 🔲 Additi
NAME			3.21	NAME	[			
STREET ADDRESS			3.3 5	STREET:	address			
ITY-ST-ZIP				CITY-S	T-ZIP			
ITLE		DETE	1	TITLE	\		L. Chan	nge 🔲 Addili
NAME				NAME				
STREET ADDRESS			- 1		address			
CITY-ST-ZIP		I Thourse		CITY - ST	T-ZIP			[ ] 1230
TITLE		☐ DELETE	5.1 1		1		☐ Chan	nge 🔲 Additi
IAME				NAME				
TREET ADDRESS					ADDRESS			
ITY-ST-ZIP ITLE		DELETE		CITY-ST TITLE	1 - ZIP		Chan	nge 🔲 Additi
i				NAME			L.J Ollan	y∘ ∟ nuoli
IAME					Le Doccoo			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	porth, that the information conviled unit	his thus done not evolt		CITY-SI		Section 119.07(3)(i), Florida Statutes. I further	codify that	the informatic
indicated officer or o	on this annual report or supplemental at	inual report is true and a r or trustee empowered t	iccurate ar	าd tha	at my signatu	rice shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	under oath	that I am an