## 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 # P96000077348 (6)

BRENRON ENTERPRISES, INC.

## **FILED** May 04 1998 8:00am Secretary of State



Principal Plac	e of Business		Mailing	Address				<b>                                     </b>	IIIDDI IID IDIID DIII	OBCII DEIII	OBING DONAL FOR	)		
7944 JUNIPER STREET 7944 JUNIPER STREET														
MIRAMAR F	FL <b>330</b> 23	MIRA	MIRAMAR FL 33023				DO NOT WRITE IN THIS SPACE							
								3. Date In	corporated or Q			7.7.02		$\neg$
								09/	17/1996					
2. Principal P	lace of Busines	2a. Mailing Address					4. FEI Number					Applied For		
21			26				65-0696252			ot Applicab	le			
Suite, Apt	#, etc.	Suite	Suite, Apt. #, etc.				5 Certifica	ate of Status De	sired			Additional	$\Box$	
22		27					J. Ourmon				Fee	Required	_	
City & State			<u> </u>	City & State				6. Election Campaign Financing \$5.00 May Be						
Zip Country				Zip Country				Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible						
<u> </u>		·¬						1	•		_		ntangible No	
24	A Name or		29 nt Registered	Agent	30	Γ			al Property Tax of and Address of					
Name and Address of Current Registered Agent  AMEDII AMPED CHAPTERS							Name BRENDA FINKHOUSE							-
AMERILAWYER CHARTERED 343 ALMERIA AVENUE														_
CORAL GABLES FL 33134						82			Number is Not A		ole)			
V	OTHE OFFI					1174	<u> </u>	<u></u>					$\dashv$	
											<del></del>			4
						84	City MIR	AMAR			FL	85 Zir	Code 3023	ĺ
11. Pursuant	to the provision	ns of Sections 607.05	02 and 607.15	08, Florida Statute	os, the al	bove	named corpo	oration submit	s this statement	for the	ourpose of	changing	its registerer	╗
office or r agent. I a	regi <b>ster</b> ed ager im <b>fam</b> iliar with	nt, or both, in the State, and accopt the eblic	e of Florida, Su ations of, Sec	uch change was a ition 607.0505. Fic	iuthorizei irida Stat	d by lutes.	the corporation	on's board of	directors. I here	by acce	pt the appo	ointment a	s registered	
	_	1 71									4/21/	198		-
Signature typed or printed name of registered agent and life if applicable (NOT) Re							i signature requie	d when reinstating			DATE			՝  բ
12.	5000	OFFICERS AN	ID DIRECTOR		13.			ADDITIO	NS/CHANGES 1	O OFFI	CERS AND			_  }
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14. Thereby 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 trustoe 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.

Ryanda) Fulkhouse PREMOD FINCHOUSE

4/21/08 (954)964 4631