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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortbam

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000082912 (2)
BROTHERS STUCCO CORP

Mailing Address Principal Place of Business

FILED Jun 09 1997 8:00am Secretary of State



7355 W. 10 CT HIALEAH FL 3				7355 W. 10 CT. HIALEAH FL 33014-4608					
							3. Date Incorporated or Qualified 10/08/1996	3a. Date o	Last Report
2. Principal Place of Business				28. Mailing Address			4. FEI Number	^	Applied For
21 Suite, Apl. #, etc.			26				.65-072329		Not Applicable
22 Suite, Apr.	#, BRC.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required
City & Stat	е			City & State			6. Election Campaign Financing \$5.00 May Be		
23			28	28			Trust Fund Contribution Added to Fees		
Zip	<u> </u>	Country	1	Z ₁ p Country		8. This corporation has liability for intangible tax under s. 199.032,			
24 25 9. Name and Address of Curren			29				Florida Statutos Yes No 10. Name and Address of New Registered Agent		
HEN	RIQUE, ANTO		urrent negist	ereo Agent	81	Name	10. Name and Address of New He	gistered Ager	<u> </u>
	5 W. 10 CT.	NO							
HIALEAH FL 33014				82 Street Add		Street Add	dress (P.O. Box Number is Not Acceptable)		
- 1		•			83				
				•			·		.
	•	,			84	City		FL 85	Zip Code
SIGNATURE	X COUNTY	of Sections 60 or both, in the and accept the	7.0502 and 60 State of Florida obligations of,				rporation submits this statement for the pation's board of directors. I hereby acce	ourpose of char of the appointn	nging its registered ent as registered
	Signature, yourd or pa		ed agent and title if			jent signature requ	uired when reinstaturg)	DATE	-,-p
12.	<u> </u>	OFFICER	S AND DIFFEC	TORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC		
NAME	HENRIQUE,	ANTONIO		L DELCT	1.1 TITLE 1.2 NAME				Change
STREET ADDRESS	7355 W. 10 (1 ADDRESS			
CITY-ST-ZIP	HIALEAH FL				1.4 CITY-				
TITLE	PVST	·		DELETE	2) 1 11	31.71			Change Addition
NAME	HENRIQUE,				2 2 NAME				• —
STREET ADDRESS	7955 W. 10 (I ADDRESS			
CITY-ST-ZIP	HIALEAH FL	33014			2. 4 CHY-	S1 · ZIP			
TITLE				[] DELETE	3.1 TITLE				Change Addition
NAME					3.2 NAME				
STREET ADDRESS						1 ADDRESS			
CITY-ST-ZIP TITLE				DELETE	3.4 CITY - 4.1 TOLE	S1 · ZIP		777	Change
NAME				_ beech	4. 2 NAME			L (Change
STREET ADDRESS						1 ADDRESS			
CITY-ST-ZIP					4.4 CITY-3				
TITLE				DELETE	5 1 TITLE				hange Addition
NAME					5.2 NAME				
STREET ADDRESS					53 STREE	ADDRESS			
CITY-ST-ZIP					5.4 CITY-	ST - 7/P			····
TITLE				☐ DELETE	6.1 THE			∐ (hange
NAME CIRCET ADDRESS					6.2 NAME				
STREET ADDRESS					•	ADDRESS			
14. I do hereb	ov certify that the	information sur	oplied with this	filing does not our	6.4 CHY-5	nyotion elato	ed in Section 119.07(3)(i), Florida Statute	s. I further perti	fy that the
information I am an of appears in	n indicated on th ficer or director on Block 12 or Blo	is annual repor of the corporate ok 13 if change	t or supplement on or the received, or on at	ntal annual report is ver or trustee empo tachment with an ac	true and acci wered to executed dress.	urate and tha oute this repo	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as if ma talutes; and th	ade under oath; tha at my name