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May 05 1997 8:00am

Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthans

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600086670 (2)

BRICE INTERNATIONAL SUPPLIES. CORP.

Principal Place of Business Mailing Address 5209 NW 74TH AVE 5209 NW 74TH AVE SUITE 215-A SUITE 215-A MIAMI FL 33166 MIAMI FL 33186-4800 3. Date incorporated or Qualified 3a. Date of Last Report 10/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0704470 Not Applicable 21 26 Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRICENO, ROQUE J 18331 PINES BLVD #197 82 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33029 83 City Zip Code 11. Pursuant 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition Tilté BRICENO, MARIA E 1.2 NAME 18331 PINES BLVD #197 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33166 1.4 CITY-ST-ZIP CHY-\$1-2IP DELETE 2 TITLE ☐ Change Addition 1016 2 2 NAME NAME STREET ANDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CHY-SI-Zif DELETE 11111 3.1 TITLE Change Addition STREET ADDRESS 3 3 STREET ADDRESS 34 CITY-ST-ZIP CITY - \$1 - ZiE DELETE Change Addition 4.1 TITLE TIME NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY SI-72 4.4 CITY - ST - ZIP DELETE Addition Dick 5.1 TITLE MAAM 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - \$1 - 71P 5 4 CITY-ST-ZIP DELFTE Addition THE 61 TITLE NAM 62 NAME SURELL ADDRESS 6.3 STREET ADDRESS C(1) - 51 - 7(P 6.4 CITY - ST - ZIP 14. Ido hereby 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 lard 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