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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000088976 (1)

BRAZILIAN ESTATES, INC.

Principal Place of Business

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Mailing Address

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



840 BARCELONA ORIVÉ BOCA RATON FL \$3432		840 BARCELONA DRIVE BOCA RATON FL 33432-8104					
					Date Incorporated or Qualified 10/29/1996	3a. Date of La	st Report
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 2725 NE 34th Street 26 2725 NE 31			4th str.		65-0704973		Not Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	1 1 '	75 Additional Required
City & State 23 FURT LAMPERONLE FL 28 FUET Lander			dalte	52	Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip Zip Zip Zip 33306 25 Zip 33306 30							
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent			
AME	RILAWYER CHARTERED		181 Name MARC E. DIMUETE				
343 ALMERIA AVENUE				82 Street Address (P.O. Box Number is Not Abceptable)			
CORAL GABLES FL 33134				252	1 NE 341 SHREET		
			83				
			84 Cit	V C		85	Zip Code,
				. LOB.		FL [Zip Code, 33306
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Sequip 607.0505, Florida Statutes.							
SIGNATURE	Marc & Dusue	lld Vaes (MARC	e. De	iquelle\	10-10-9	<u>Y</u>
1	Signature, typed or printed name of registered agent		egistered Agent eigi	nature required		DATE	TO DO 11 40
12/	OFFICERS AND	DELETE DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	EHS AND DIREC	
TITLE	=	order					ac Dyapaton
NAME	DUQUETTE, MARC E		1.2 NAME				
STREET ADORESS	840 BARCELONA DRIVE		1.3 STREET ADDR	ESS		01	
CITY-ST-ZIP	BOCA RATON FL 33432 VSD	DELETE	2.1 TITLE	-114-	CTATEMENT	Chan	nge Addition
TITLE	STITT, WILLIAM E		2.2 NAME		A H H H H HH H A P H H		
NAME	840 BARCELONA DRIVE		2.2 NAME 2.3 STREET ADDR	ree		Sc 10-2	4-9/
STREET ADDRESS	BOCA RATON FL 33432		2.4 CITY-ST-ZIF		-	,	
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STREET ADDRESS			5.3 STREET ADDR	ESS	•		
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Char	ige 🔲 Addition
NAME			6.2 NAME		•		
STREET ADDRESS			6.3 STREET ADDR	ESS			ľ
CITY-ST-ZIP			6.4 CITY-ST-ZIP	ı			·

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.