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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000090549 (2)**

BRIAN RECTOR AND ASSOCIATES, INC.

100 LAKEVIEW DRIVE APT 316 FORT LAUDERDALE FL 33326		APT 316	100 LAKEVIEW DHIVE APT 316 FORT LAUDERDALE FL 33326-2509						
						3. Date Incorporated or Qualified 11/04/1996	3a. Date of La	st Report	
2. Principal Pl	lace of Business	2a. Mailing Ad	dress			4. FEI Number		Applied For	
21		26	26			65-1707971		Not Applicable	
Suite Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Regulfed			
22		27							
City & State	n e	1-1	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
700	Zip Country		28						
24	25	29 30		Country โ		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		ar 6. 199.032,	
9. Name and Address of Current Registered Agent				<u> </u>		10. Name and Address of New Registered Agent			
					81 Name				
100		82	On Charles to Control of the Control						
APT			Street Ad		idress (P.O. Box Number is Not Acceptable)				
FOR	T LAUDERDALE FL 33326			83					
				84	City		85	Zip Code	
		7.0/00	dala Cantutana	the electric			FL "	and the second	
office or n	io the provisions of Sections 60 egistered agent, or both, in the	17.0502 and 607.1508, FIG State of Florida. Such ch	orida Statutes, ange was aut	, the above horized by	e-named o / the corp	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changit of the appointmen	t as registered	
agent. Far	m familiar with, and accept the	obligations of, Section 60	17.0505, Floric	la Statute	3.	•			
SIGNATURE	·		0.015				DATE		
12,	Signature Upod or printed name of registr OFFICE 6	RS AND DIRECTORS	(NOTE: H	13.	eni signature p	equired when reinstating) ADDITIONS/CHANGES TO OFFICE		TORS IN 12	
1174	D		DELETE	1.1 TITLÉ	·······	ABBITTONIA/OTTATIGES TO STITLE	Chan		
NAME	RECTOR, BRIAN	_		1.2 NAME	-				
STREET ADDRESS 100 LAKEVIEW DRIVE APT 316				1.3 STREET ADDRESS				ĺ	
CITY: \$1 - 241	EODT LAUDEDDALE EL 2222			1.4 CHTY - ST - ZIP					
THE			DELETE	21 TITLE	····		Char	nge Addition	
NAME			!	22 NAME	[
STREET ADDRESS				2.3 STREET	ADDRESS				
CITY-ST-ZIP				2. 4 CITY-	1	i ta	1, 1	1	
1014				3.1 TITLE			☐ Char	nge Addition	
NAME	I			3.2 NAME	ļ			ļ	
STREET ADDRESS				3 3 STREET	ADDRESS			1	
CITY-ST-2IP				3.4. CITY~	ST-ZIP				
TITLE	DELETE 4.1 T			4.1 TITLE			☐ Char	age Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS			Į	
CITY - S1 - ZIP				44 CiTY - 9	T-ZIP				
TITLE			DELETE	5.1 TITLE			☐ Char	nge Addition	
NAME				5.2 NAME				1	
STREET ADDRESS			!	5.3 STREET	ADDRESS			[
CHY-S1-ZIP				5.4 CITY-S	T-71P				
TIFLE			DELETE	61 TITLE			☐ Char	nge Addition	
NAME				6.2 NAME	ŀ			}	
STREET ADORESS				6.3 STREET	ADDRESS				
CITY - S1 - 2iF:				6.4 CITY - S	ST-ZIP				

SIGNATURE:

appears in Block 12 or Block

Brian Kitter 167

Brian Rector

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 eath; that it 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

4/2/97 954-384-4818

FILED

Apr 08 1997 8:00am

Secretary of State

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