2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000103627

BMR INVESTMENTS G.P., INC.



Principal Place of Business

BROADVIEW TERRACE #308 1560 LANCASTER TERRACE JACKSONVILLE, FL 32204-4146 Mailing Address

BROADVIEW TERRACE #308 1560 LANCASTER TERRACE JACKSONVILLE, FL 32204-4146

FILED Apr 14, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04082004 No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3416313

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Daytime Phone #

Cate

6. Name and Address of Current Registered Agent

BREEN, ROBERT E **BROADVIEW TERRACE #308** 1560 LANCATER TERRACE

SIGNATURE:

DO NOT WRITE

JACKSONVILLE, FL 32204-4146			IN THIS SPACE		
	named entity submits this statement for the plans of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered				required when reinsteting)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	<u> </u>		1100000112371
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREEN, ROBERT E BROADVIEW TER.#308,1560 LANCA: JACKSONVILLE, FL 322044146	STER TER.	000000112371 04/14/04-80020-006 150.00		
TITLE NAME STREET ADDRESS CHY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-ST-ZIP				_	÷
12. I hereby of indicated of the corchanged	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment this an address with all	ing does not qualify for the exer and accurate and that my signate to execute this report as requir other like empowered.	nption state ure shall haved ed by Chap	d in Section 119.07(3) ve the same legal effecter 607, Florida Statute	 Florida Statutes. I further certify that the information t as if made under oath, that I am an officer or director is, and that my name appears in Block 10 or Block 11 if