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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P970000\6867

BRISBEN SALEM RUN, INC.

FILED May 27 1998 8:00am Secretary of State



			processive military sees.	1
Principal Place of Business Mailing Address			Hironoman	
2321 N.W. 33RD STREET #212	2321 N.W. 33RD STREET	#212		
FORT LAUDERDALE FL 33309	FORT LAUDERDALE FL 33	3309	DO NOT WRITE IN THIS	C CDACE
			3. Date Incorporated or Qualified	3 GFACE
			12/11/51	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0730721	Not Applicable
Suite, Apt. W. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		5. 00.00000000000	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28	Country	Trust Fund Contribution	Added to Fees
24 25	⊢ , ` ⊢	30	This corporation owes or has paid the c Personal Property Tax due June 30.	Yes No
9, Name and Address of Current		30]	10. Name and Address of New Registered	
ATKINSON, WILSON C III 81 Name				
C/O ATKINSON, DINER, STONE, E	r. Al.	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
1946 TYLER STREET		Street Addi	ess (r.o. box Number is Not Acceptable)	
HOLLYWOOD FL 33302		83		
		84 City		85 Zip Code
		04 049	F.	L 63 20 0000
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga	tions of, Section 607.0505, Flor	rida Statutes.	tions board of directors. Thereby accept the ap	promittient as registered
SIGNATURE				
Signature Typed or printed name of registered agen		Registered Agent signature requi	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 40
12. OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AF	Change Addition
NAME BRISBEN, WILLIAM O		1.2 NAME		
STREET ADDRESS 2321 N.W. 33RD STREET #21	2	1.3 STREET ADDRESS		
CITY-ST-ZIP FORT LAUDERDALE FL 33309	=	1.4 CITY+ST-ZIP		
TITLE D	☐ DELETE	21 TITLE		Change Addition
NAME SCHULER, ROBERT E		2.2 NAME		
STREET ADDRESS 7800 EAST KEMPER ROAD	,	2.3 STREET ADDRESS		
CITY-ST-ZIP CINCINNATI OH 45249		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
HAME		1. 2 NAME		
STREET ADORESS		4.3 STREET ADDRESS		/
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		115/20
STREET ADDRESS		5.3 STREET ADDRESS		11/40/4
CITY - \$1 - Z:P	DELETE	5 4 CITY - ST - ZIP	/	Change Addition
NAME	□ DEFE+E	6.1 TITLE	الراسان والأناب سنسلل وسندر والنش ومنتي ومنتي وللندر ومساد	
STREET ADDRESS		6 2 NAME	7000025384	t ⊃ f
CITY-ST-ZIP		6.3 STREET ADDRESS	-05/28/3801019	U41

14. Thereby 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 suppliemental 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 trusted 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

ulsalna