

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000068055 (7)

1. Corporation Name
BROG, INC.

Principal Place of Business
C/O BROOK DONALD SMITH
19380 COLLINS AVENUE APT. PENTHOUSE 18
MIAMI BEACH FL 33180

Mailing Address
C/O BROOK DONALD SMITH
19380 COLLINS AVENUE APT. PENTHOUSE 18
MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/06/1997

4. FEL Number
65-6795997 ☒ Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business
21 12130 Kelly Greens Blvd

2a. Mailing Address
26 C/O Brook Donald Smith

Suite, Apt. #, etc.
22 # 92

Suite, Apt. #, etc.
27 12130 Kelly Greens Blvd, Apt

City & State
23 Ft. Myers, FL

City & State
28 Ft. Myers, FL 33908

Zip
24 33908

Country
25 USA

Zip
29 33908

Country
30 USA

9. Name and Address of Current Registered Agent

SMITH, BROOK DONALD
19380 COLLINS AVENUE PENTHOUSE 18
MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

81 Name ROGER M. DUJETA
82 Street Address (P.O. Box Number is Not Acceptable)
88 Cadima Avenue
83
84 City Coral Gables FL 85 Zip Code 33134

11. Pursuant to the provisions of sections 607.0502 and 607.1609, 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 section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature of officer or director of corporation or registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 9/16/98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, BROOK DONALD	
STREET ADDRESS	19380 COLLINS AVENUE PENTHOUSE 18	
CITY-ST-ZIP	MIAMI BEACH FL 33180	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SMITH, BROOK DONALD	
1.3 STREET ADDRESS	19380 COLLINS AVENUE PENTHOUSE 18	
1.4 CITY-ST-ZIP	MIAMI BEACH FL 33180	
2.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	SMITH, BROOK DONALD	
2.3 STREET ADDRESS	19380 COLLINS AVENUE PENTHOUSE 18	
2.4 CITY-ST-ZIP	MIAMI BEACH FL 33180	
3.1 TITLE	D, P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SMITH, BROOK DONALD	
3.3 STREET ADDRESS	12130 KELLY GREENS BLVD #92	
3.4 CITY-ST-ZIP	FT. MYERS, FL 33908	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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.

SIGNATURE: *[Signature]*

9/16/98

CR2E034 (5/98)