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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000102629 1. Corporation Name BRUT ENTERPRISES, INC. Principal Place of Business 3610 YACHT CLUB DRIVE #411 AVENTURA FL 33180 DIVISION OF CORPORATIONS Mailing Address 3610 YACHT CLUB DRIVE #411 AVENTURA FL 33180

FILED Jan 28, 1999 8:00am Secretary of State

01-28-1999 90010 026 ***150.00



3610 YACHT CLUB DRIVE #411 AVENTURA FL 33180			3810 YACHT CLUB DRIVE #411 AVENTURA FL 33180			DO NOT WRITE IN THIS SPACE	
	•					3. Date Incorporated or Qualifed 12/05/1997	
2. Principal Pl	lace of Business	2a. Mailin	ng Address	*		4. FEI Number Applied For	
21		26			**	65-0798191 Not Applicabl	
Suite, Apt.	#, etc.	. Suite,	, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27	· .			ree Required	
City & Stat	e ,	City 8	& State			6. Election Campaign Financing \$5.00 May Be	
23	<u> </u>	28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	_	· Country		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes Mo	
24	25	29	30	<u> </u>	·	1 Ordering 1 Topolog 1 To	
	9, Name and Address of	Current Registered	Agent	81	Name	10. Name and Address of New Registered Agent	
COLI	MADTZ MADO C	The state of the s		01	Name	<u> </u>	
	WARTZ, MARC S	44			Street Address (P.O. Box Number is Not Acceptable)		
	YACHT CLUB DRÎVE #4 NTURA FL 33180					5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
AVEI	VIUHA PL 33 180			83			
				84	City	85 Zip Code	
arthra ar Crist e :						FL_	
11. Pursuant	to the provisions of Sections	607.0502 and 607.150	8, Florida Statutes,	the above	e-named corpo	pration submits this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the m familiar with, and accept of	ie obliga țio ns of, Sectic	on 607.0505, Florida	Statutes	i.	nation submits this statement for the pulpose of changing its registered n's board of directors. I hereby accept the appointment as registered	
SIGNATURE		rait 1	MAKC >	ChW	ANTZ	- / ///	
SIGNATORE	Signature, typed or printed name of regi	istered agent and title if applicat	ble. (NOTE: Reg	gistered Ager	nt signature required	when reinstating) CATE	
12.		ERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
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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 trostee 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, with all other like empowered.

SIGNATURE

IGNATURE AND TYPED OF FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SchWAUTZ 1/

99 936-0185 Daytime Phone #

42EU34 (11/98)