## 2002 UNIFORM BUSINESS REPORT (UBR) Apr 16, 2002 8:00 am Secretary of State P98000075845 DOCUMENT # 1. Entity Name 04-16-2002 90144 034 \*\*\*150.00 BRANDON IMPORTING COMPANY Principal Place of Business Mailing Address 3661 W. BLUE HERON BLVD. 3661 W. BLUE HERON BLVD. RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 Mailing Address PAINWA Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 10 00 City & State City & State 4. FEI Number Applied For $\mathcal{B}^{\mathsf{eac}}$ Florida 65-0860046 Beach Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE CREATIONS ENTERPRISES INC. 4521 PGA BOULEVARD, #211 PALM BEACH GARDENS FL 33418 8. The above named entity submits this statement for the purpose of changing its registered office egistered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable stered Agent signature required when reinstating) FILE NÓW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition BRANDON, NICOLF NAME NAME 1450 ENCLAVE CIRCLE STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33411 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information sopplied 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 report or supplemental 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 11 or Block 12 if

SIGNATURE:

changed, or on an attachment v

CR2E034 (9/01)