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

**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # PORODOR1091

FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

## Katherine Harris

## Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90040 027 \*\*\*150.00

1. Corporation BRANDE	E HOLDING COMPANY OF					
Principal Place of Business Mailing Address					<u></u>	- I (201152) (20 16)2) IBII! SAIF! BEII! SBII! SEIS IBIN IBII IBII IBII IBII
2921 CENTERPORT CIRCLE 2921 CENTERPORT CIRCLE						
POMPANO BEA	CH FL 33064	POMPANO BEACH FL 330	54			DO NOT MOITE IN THIS SPACE
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 09/16/1998
Principal Place of Business     2a. Mailing Addres						4. FEI Number Applied For
2. Philipal Place of business		26				65-086/226 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip Cou		ntry		This corporation owes the current year Intangible
		29	30			Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent		1		10. Name and Address of New Registered Agent
HOPPIANI CTERIFM V				81	Name	
HOFFMAN, STEPHEN V 1500 NORTH FEDERAL HIGHWAY, SUITE 200			f	82	Street Addre	ess (P.O. Box Number is Not Acceptable)
FORT LAUDERDALE FL 33304		OHE 200				
FUR	LAUDENDALE FL 33304			83		•
			Ī	84	City	FL 85 Zip Code
11. Pursuant office or re	to the provisions of Sections 607.050, egistered agent, or both, in the State	2 and 607.1508, Florida Statut of Florida. Such change was a	es, the ab	bove by 1	-named corpo the corporation	oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered
	т татінаг жіті, апо ассері те оонда	ions of, Section 1007.0505, Fic	ilua Statu	1100.		
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable (NOTE	: Registered	Agent	t signature required	when reinstating) DATE
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE		11111	ιε		Change Addition
NAME	ROBERTS, LILLIAN E		1.2 NA	ME		
STREET ADDRESS			1.3 STF	STREET ADDRESS		
CITY-ST-ZIP			1.4 CIT	Y-ST	-ZIP	
TITLE	D DELETE 2		2.1 TIT	LE		☐ Change ☐ Addition
NAME	110111111111111111111111111111111111111		2.2 NA	ME		
STREET ADDRESS			2.3 STF	REET	ADDRESS	
CITY-ST-ZIP			2. 4 Cl		T-ZIP	
TITLE		☐ DELETE	3.1 TIT			Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 STF	REET	ADDRESS	
CITY-ST-ZIP		O DELETT	34 CI		T-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TIT			☐ Change ☐ Addition
NAME			4. 2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	DELETE			4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE		□ DETELE	5.1 III 5.2 NA			
NAME					ADDRESS	
STREET ADDRESS			5.4 CIT			
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	6.1 TIT			☐ Change ☐ Addition
			6.2 NA			
NAME					ADDRESS	
STREET ADDRESS				rv et	į	

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 effective memory of the corporation of the receiver of trustee empowered.

SIGNATURE: