

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

PROFIT
CORPORATION
ANNUAL REPORT
1999FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000106887 ✓OK

Corporation Name

BRAD HUNTER, INC.

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90022 018 ***150.00



Principal Place of Business

MARK D. COHEN, P.A.
PRESIDENTIAL CIRCLE, STE 485 SOUTH
WOOD FL 33021

Mailing Address

% MARK D. COHEN, P.A.
PRESIDENTIAL CIRCLE, STE 485 SOUTH
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1998

4. FEI Number

☒ Applied For
☐ Not Applicable

Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COHEN, MARK D ESQ.
PRESIDENTIAL CIRCLE, STE 485 SOUTH
4000 HOLLYWOOD BLVD.
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Pursuant to the provisions of Sections 607.0522 and 607.1506, 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 607.0606, Florida Statutes.

SIGNATURE

Signature, typed or printed name (registered agent only and 15% if applicable)

(NOTE: Registered Agent signature required when re-appointing)

4/27/99

OFFICERS AND DIRECTORS

E D
HUNTER, BRAD
EET ADDRESS: 4000 HOLLYWOOD BLVD. STE 485 SO.
E ST-ZIP: HOLLYWOOD FL 33021☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE☐ DELETE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

I, 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, with all other like empowered.

CR2E034 (1/99)