

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000061296

1. Entity Name

BRINI INVESTIGATION SECURITY CORP.

*D/B/BRANDY WINE*

Principal Place of Business

1001 NE 125 ST. #205  
MIAMI FL 33161

Mailing Address

1001 NE 125 ST. #205  
MIAMI FL 33161

2. Principal Place of Business

*155 S MIAMI AVE*

Suite, Apt. #, etc.

*PH-1*

City & State

*MIAMI FL 33130*

Zip

Country

3. Mailing Address

*P.O. BOX 382203*

Suite, Apt. #, etc.

*MIAMI*

City & State

*FL 33238-2203*

Zip

Country

*33238-2203 MIAMI DADE*

6. Name and Address of Current Registered Agent

BRINI, DELINOIR

1001 NE 125 ST. #205  
MIAMI FL 33161

7. Name and Address of New Registered Agent

Name *Delinoir BRINI*

Street Address (P.O. Box Number is Not Applicable)

*155 S MIAMI PH 1*

City

*MIAMI*

FL

Zip Code

*33130*

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *[Signature]*  
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

*04/01/01*

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE *PT* ☐ Delete  
NAME *BRINI, DELINOIR*  
STREET ADDRESS *443 N.E. 70TH STREET*  
CITY-ST-ZIP *MIAMI FL 33138*

TITLE *VS* ☐ Delete  
NAME *BRINI, DAVID*  
STREET ADDRESS *443 N.E. 70TH STREET*  
CITY-ST-ZIP *MIAMI FL 33138*

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *Vice Pres* ☐ Change ☒ Addition  
NAME *BRAD. A. ALEXANDER*  
STREET ADDRESS *155 S MIA*  
CITY-ST-ZIP *FL 33130*

TITLE ☐ Change ☐ Addition  
NAME *DAVID BRINI*  
STREET ADDRESS *The Borene. Secretary.*  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME *443 N.E. 70th*  
STREET ADDRESS *MIA*  
CITY-ST-ZIP *FL 33138*

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 registered 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*04/01/01*

Daytime Phone #

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90042 041 \*\*\*150.00

552960



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0946692** ☐ Applied For ☒ Not Applicable

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

CR2E034 (10/00)

# State of Florida



Department of State

Attachment

P99000061296

552960

I certify from the records of this office that BRANDYWINE is a Fictitious Name registered with the Department of State on February 14, 2001.

The Registration Number of this Fictitious Name is G01044900219.

I further certify that said Fictitious Name Registration is active.

I further certify that this office began filing Fictitious Name Registrations on January 1, 1991, pursuant to Section 865.09, Florida Statutes.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this the  
Fourteenth day of February, 2001



CR2EO22 (1-99)

*Katherine Harris*

Katherine Harris  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

Attachment # P9900006/296  
552960

February 14, 2001

BRANDYWINE  
155 S MIAMI AVE PH1  
MIAMI, FL 33130

Subject: **BRANDYWINE**

REGISTRATION NUMBER: **G01044900219**

This will acknowledge the filing of the above fictitious name registration which was registered on February 14, 2001. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

**IT IS THE RESPONSIBILITY OF THE BUSINESS TO NOTIFY THIS OFFICE IN WRITING IF THEIR MAILING ADDRESS CHANGES.** Whenever corresponding please provide assigned Registration Number.

Enclosed is your certificate(s) as requested.

Should you have any questions regarding this matter you may contact our office at (850) 488-9000.

/pm  
Division of Corporations

Letter No. 901A00009326

Security

155 S. Miami Ave PH 1  
Miami, FL 33130  
Tel: (305) 530-8071  
Fax: (305) 530-1332

Attachment # p4900006/296  
552960

February 27, 2001


Florida Dept. of State  
Division of Licensing  
PO Box 6687  
Tallahassee FL 3214-6687

Re: Change of License Name  
Brini Investigation Security Corp. #B 9800009  
d/b/a Brandywine-Reg. #G01044900219

Dear Sir or Madam:

Enclosed please find copies of B License and Fictitious Name  
Registration. A ten dollar money order for the fee is also enclosed.  
Please forward a new B License in the name of Brandywine.

Thank you,

  
Delinoir Brini

UNITED STATES POSTAL SERVICE		CUSTOMER'S RECEIPT			
KEEP THIS RECEIPT FOR YOUR RECORDS	PAY TO	Sec. of State			SEE BACK OF THIS RECEIPT FOR IMPORTANT CLAIM INFORMATION <b>NOT NEGOTIABLE</b>
	ADDRESS				
	C.O.D. OR USED FOR				
SERIAL NUMBER	YEAR MONTH DAY	POST OFFICE	AMOUNT	CLERK	
02674983870	2001-02-27	331280	10.00	0003	