


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000110997</b> 1. Entity Name BRANMARIS, INC.	
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Principal Place of Business 2705 SE RANCH ACRES CIRCLE JUPITER, FL 33478	Mailing Address 2705 SE RANCH ACRES CIRCLE JUPITER, FL 33478
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**DO NOT WRITE IN THIS SPACE**



04222004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0969403	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  WITT, PHYLLIS 2705 SE RANCH ACRES CIRCLE JUPITER, FL 33478
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WITT, PHYLLIS 2705 SE RANCH ACRES CIRCLE JUPITER, FL 33478
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WITT, LAWRENCE 2705 SE RANCH ACRES CIRCLE JUPITER, FL 33478
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

UN00000134543  
04/28/04-80021-025 150.00

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12. 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4-24-04 561-624-2001 <small>Date Daytime Phone #</small>
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