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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

BRS, INC.

Principal Place of Business

Mailing Address

810 N.W. 130TH AVE

310 NW 130 AVE

FILED May 13 1997 8:00am Secretary of State

1012 DOUL -942 1



| MIAMI PL 3318 US | 2 | MIAMI PL 33182-1142 US | | | | | |
|--|---|--|--------------------------------|---|---|---|----------------------|
| | | | | | 3. Date incorporated or Qualified 01/15/1991 | 3a. Date of Last Re 03/05/1996 | :port |
| | ace of Business | 2a. Mailing Address | a .i | . (1 | 4. FEI Number | | plied For |
| 21 53 0 | 5 West Crenshaw S | St. 26 5305 West (| rensi | 4W 21 | 65-0239420 | | l Applicable |
| Suite, Apt. (| #, StC. | 27 | | | 5. Certificate of Status Desired | \$8.75 A | |
| City & State |) | City & State | | | 6. Election Campaign Financing | \$5.00 | · |
| 23 Jam | ا سر | 28 Tampa F | -L | | Trust Fund Contribution | Added to | |
| Zip | Country | 7ip | Country | | 8. This corporation has liability for in | | |
| 24 3363 | 14 25 US | 29 33634 3 | o U. | S | | Yes No | |
| | 9. Name and Address of Curre | nt Registered Agent | J | | 10. Name and Address of New Reg | istered Agent | |
| BRID | GES, ROGER A. | | 81 | Name | | | |
| 334 MINORCA AVENUE | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| SUITE 200 | | | | | | | |
| COF | VAL GABLES FL 33134 | | 83 | | | | |
| | | | 84 | City | | 85 Zip C | lode. |
| | | · | | | orporation submits this statement for the p | FL | |
| agent. I ar SIGNATURE | agistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered by | gations of, Section 607.0505, Florid | da Statute | s. | ration's board of directors. I hereby accept | of the appointment as r | egislered |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECTOR | S IN 12 |
| TITLE | P | DELETE | 1.1 TALE | 7 | Director | Change | Addition |
| NAME | STRINGER, DALE D | | 1.2 NAME | 4 | stringer, Dale D. 405 Laguna Ave | | |
| STREET ADDRESS | 310 NW 130 AVE | | 1.3 STREE | ADDRESS | 405 Laguna Ave | | |
| CITY-ST-ZIP | MIAMI FL | . 4 | 1.4 COY - 9 | 61-2IP d | Luy Largo FL 33037 | | |
| TITLE | 8 | DELETE | 2 1 TOLE | | 1 0 | Change | Addition |
| NAME | stringer, sandra | • | 2.2 NAME | | | | |
| STREET ADDRESS | 310 NW 130 AVE | | 2.3 \$1REE1 | ADDRESS | | | |
| CITY-ST-ZIP | MIAMI FL | | 2. 4 CITY- | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | <u> </u> f | President Jomer Claytor 5305 West Crenshaws | ☐ Change | Addition |
| NAME | | | 3.2 NAME | 1 | Homer Claytor | <u>.</u> | |
| STREET ADDRESS | | | 3 3 STREET | ADDRESS 5 | 305 West Crenslaw | 714 | |
| CITY-ST-ZIP | | DELETE | 34. City- | ST - 71P | Tampa, FL 33634 | Change | The same of |
| TITLE | | L. DEELIE | 4111116 | } | , | ☐ Cuantite | Addition |
| NAME | | | 4. 2 NAME | 1.1000100 | | | |
| STREET ADDRESS | | | 4.3 \$1REF1 | | | | |
| CITY-ST-ZIP TITLE | | DELFTE | 4.4 CITY - 9 5.1 TITLE | 01-711 | | Change | Addition |
| NAME | | and section | 5.2 NAME | | | 5186.90 | |
| STREET ADDRESS | | | | I ADDRESS | | | |
| CITY-ST-2IP | • | | 5.4 CITY - 3 | | | | |
| TITLE | · · · · · · · · · · · · · · · · · · · | DELETE | 6.1 TITLE | | | Change | Addition |
| NAME | • | | 6.2 NAME | | | 3 | . = |
| STREET ADDRESS | ř. | | 6.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 CITY - S | | | | |
| 14. I do heret | by certify that the information suppli | ed with this filing does no qualify | for the exe | emption sta | ted in Section 119,07(3)(i), Florida Statutes | s. I further certify that t | ihe |
| informatio I am an of appears in | n indicated on this annual regist or licer or director of the corporation on Block 12 or Block 13 if lianged, | supplemental annual report is true or the receiver or trueteo empower or on an exactment with an addre | e and acc ed to exec ess | urate and th | ted in Section 119.07(3)(i), Florida Statutes nat my signature shall have the same legal port as required by Chapter 607, Florida S | Lettect as if made und tatutes; and that my no | ier oath; tha ame |