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

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

S39739

DOCUMENT #

Bernard Brothers Enterprises, Inc.

Mailing Address

FILED Apr 22 1997 8:00am Secretary of State

| 3590 U.S. Hwy. 17-92, # 101 3590 U.S. Hwy. 17-92, # 101 Lake Mary, FL 32746 | | | | | |
|--|------------------------------------|------------------------|--|---|---|
| Lake Mary, FL 32746 | Lake Mary, FI | 3214 | O | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| | | | | 03/20/91 | 01/25/96 |
| 2. Principle Place of Business 2a. Mailing Address | | | | 4. FEI Number | Applied For |
| 21 3590 U.S. Hwy. 17-92 | 26 3590 U.S. | 590 U.S. Hwy, 17-92 | | 59-3056884 | Not Applicable |
| Suite, Apt. #. etc | Suite, Apt. #, etc. | ····· | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 # 101 | 27 # 101 | | 5. Command of change become | Fee Required | |
| Orty & State | | | . | 6. Election Campaign Financing | \$5.00 May Be |
| Lake Mary, Florida | 26 Lake Mary, Florida Zip Country | | | Trust Fund Contribution Added to Fees | |
| Zip Country 25 U.S.A. | | ¬''^ \ | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | |
| 24 32/40 25 U.S.A. 9. Name and Address of Current | | 130 0. | 10. Name and Address of New Registered Agent | | |
| 81 Name | | | | | |
| George H. Bernard | | | 80 Stroet Address (D.O. Pou Number is Not Appendix No. | | |
| 3590 U.S. Hwy. 17-92, # 101 | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| Lake Mary, FL 32746 | | | 3 | | |
| | | ļ_ | 4 63. | | Tot Lin Code |
| | | • | 4 City | | FL 85 Zip Code |
| 11 Pure year to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed 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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. | | | | | |
| | • | | | | |
| SIGNATURE: (a.g. in process on the name of registered agent | | TE: Registered A | gent signature require | | DATE |
| 12. OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | ************************************** |
| D/P/VP/T/S | ☐ DELETE | 1 1 TITLE | | | Change Addition |
| """ 3590 U.S. Hwv. 17-92. # 101 | | | | | |
| | | | et address | | |
| Lake Mary, FL 3274 | 140 Mary FI 227/6 | | | | Character |
| THE | DELETÉ | 2 1 TITLE | Į. | | L] Change L_ Addition |
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| | 0500 11 0 11 17 00 11 101 | | ET ADDRESS | | |
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| Onv State Lake Mary, FL 3274 | O DELETE | 3.4. GHY | -ST-ZIP | | ☐ Change ☐ Addition |
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| SMEET AUDRESS | | | -ST-ZIP | | |
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| City St ZP | | 5.4 CITY | l. | | • |
| THE | DELETE | 6.1 TITLE | | ייים איין איין איין איין איין איין איין | |
| NAM: | | 6.2 NAM | . | 80000215 -04/24/97010 | 16-014 |
| STREET ADDRESS. | | 1 | ET ADDRESS | ***165.00 | ויונו הינ |
| Of r. ST-ZiP | | | · ST · ZIP | | |
| 14. I go hereby cert fy that the information supplied | with this filing does not qua | lify for the e | xemption stated | o in Section 119.07(3)(i), Florida Statute | s. I further certify that the |

information indicated on this armula report of supplemental armular report is true and accurate and that my signature shall have the same legal effect as it made under of lam an effect of director of the corporation of 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 for on an attachment with an address.

George H. Bernard, President 04/18/97 (407) 324-0110