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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # S41387

(9)

BRAUWERMAN FINANCIAL GROUP, INC.

| Principal Place of Business | Mailing Address    |  |
|-----------------------------|--------------------|--|
| 99199 STATE BOAD 7          | 10110 CTATE COAC 7 |  |

## **FILED** Jan 23 1998 8:00am Secretary of State



**BOCA RATON FL 33428** BOCA RATON FL 33428 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/27/1991 2. Principal Place of Business 2a. Mailing Address Applied For 23123 STATE RO Some 26 65-0248768 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 50,Te 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 Poles Blad 29 9. Name and Address of Current Registered Agent 30 Personal Property Tax due June 30. X Yes ☐ No 10. Name and Address of New Registered Agent Name BRAUWERMAN, BERNARD 23123 STATE ROAD 7 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** 83 City 85 Zip Code 607 502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered pulposed by the corporation of the corporation o 11. Pursuant to the provisions of Sections 6 office or registered agent, or both in the of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition BRAUWERMAN, BERNARD NAME 1.2 NAME 23123 STATE ROAD 7 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST- ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 frue 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 trusted 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 or an attachment with an address.

SIGNATURE: