2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S41387 1. Entity Name BRAUWERMAN FINANCIAL GROUP, INC.					FILED May 02, 2000 8:00 am Secretary of State 03-06-2000 90062 031 ***150.00				
Principal Place	of Business	Mailing Address		7					
23123 STATE RD 7 SUITE 231 BOCA RATON FL 33446 US		23123 STATE ROAD 7 SUITE 231 BOCA RATON FL 33446-1305			: : #0:: ***********************************	DIRÎJ JIRDÎ (UZA) (AZI 188	2 guni diai; Pièt Gisi) Rio	#78# (B31	
2. Principal Place of Business 7261 W. AFLARFIL AUR		3. Mailing Address							
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.		}		DO NOT WRITE	N THIS SPACE		
Delay Beach A.		City & State		4. F	El Number	65-0248768		plied For t Applicable	
33446		Zip	Country			Status Desired	\$8.75 Add		
	6. Name and Address of Current F	legistered Agent	Name	7. N	ame and A	ddress of New Reg	istered Agent		
BRAUWERMAN, BERNARD 13615 WEYBURNE DR DELRAY BCH FL 33428				Street Address (P.O. Box Number is Not Acceptable)					
Carr &	a source dorner		City				FL Zip Cod	e	
8. The above r	named entity subrais this statement for	the purpose of changing its re	egistered office or reg	istered ago	ent, or both,	in the State of Florid			
SIGNATURE _	Signature, hipped or printible name configurationed agent a	nd title if applicable (NOTE:	Registered Agent signature re	quired when re	instating)		DATE		
			FEE IS \$150.00 Fee will be \$550. to Department of		,	tion Campaign Final Fund Contribution.		00 May Be d to Fees	
11.	OFFICERS AND		12.			HANGES TO OFFIC	CERS AND DIRECTOR		
TITLE NAME STREET ADDRESS	D Brauwerman, Bernard 23123 State Road 7	Delete	NAME E	7261		RAUWERMA FRLANTICA CACH FL		☐ Addition	
CITY-ST-ZIP	BOCA RATON FL PRESIDENT	☐ Delete	TITLE	OELK	47 73E	Ach FL	Change	Addition	
TITLE NAME STREET ADDRESS	BERNALD BRAUMS 7261 W. ASTA DetRay BEACH	A TO	NAME STREET ADDRESS				<u>.</u> •		
CITY-ST-ZIP	Detary BRACK	<i>FL</i> 33496 □ Delete	CITY-ST-ZIP				☐ Change	Addition	
TITLE NAME STREET ÄDDRESS	r."	_ Delete	NAME STREET ADDRESS	~~	ا موجود المحمد	••	<u></u>		
CITY-ST-ZIP		☐ Defete	CITY-ST-ZIP TITLE NAME				(Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE NAME	25. `. `:	☐ Defete	TITLE NAME				Change	Addition	
STREET ADDRESS CITY-ST-ZIP	Salar Hand		STREET ADORESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-71P				□ Change	Addition	
13, I hereby	I certify that the information supplied with on this report or supplemental report provation or the receiver or trustee empt, or on an attachment with an address,				e legal enec vida Statute	s; and that my name	appears in Block 11	or Block 12 if	
	TURE: SIGNAT	Bello			3	127/00	638-6 Daytime Phone	216	