

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

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

FILED
 97 SEP 10 AM 10:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # S47757
 1. Corporation Name
 BRWC, INC.

Principal Place of Business 2385 Stirling Road Ft. Lauderdale, Fl. 33312	Mailing Address 2385 Stirling Road Ft. Lauderdale, Fl. 33312
---	---

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 4/25/91	3a. Date of Last Report 4/16/96
21	2b	4. FEI Number 65-0255950	Applied For Not Applied
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
City & State	City & State	8. This corporation has liability for intangible tax under s. 199.03, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23	28		
Zip	Country	29	30
24	25		

9. Name and Address of Current Registered Agent

American Information Services, Inc.
~~901 Brickell Avenue~~
~~Suite 2400~~
~~Miami, Florida 33131~~

10. Name and Address of New Registered Agent

81 Name American Information Services, Inc.
82 Street Address (P.O. Box Number is Not Acceptable) One S.E. Third Avenue
83 28th Floor
84 City Miami
85 Zip Code FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Maggie C. V. J. DATE 9/5/97

12. OFFICERS AND DIRECTORS

TITLE DPS	<input type="checkbox"/> DELETE
NAME Richard C. Rochon	
STREET ADDRESS 900 S. Andrews Ave., 6 Floor	
CITY-ST-ZIP Pt. Lauderdale, Florida	
TITLE VP	<input type="checkbox"/> DELETE
NAME Edward M. Carriero	
STREET ADDRESS 2385 Stirling Road	
CITY-ST-ZIP Ft. Lauderdale, Florida	
TITLE REP.	<input checked="" type="checkbox"/> DELETE
NAME Carlos Vidueira	
STREET ADDRESS 2385 Stirling Road	
CITY-ST-ZIP Ft. Lauderdale, Florida	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
1.2 NAME	
1.3 STREET ADDRESS 450 East Las Olas Blvd., Suite 1500	
1.4 CITY-ST-ZIP Ft. Lauderdale, Florida 33301	
2.1 TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
2.2 NAME William M. Pierce	
2.3 STREET ADDRESS 450 East Las Olas Blvd., Suite 1500	
2.4 CITY-ST-ZIP Ft. Lauderdale, Florida 33301	<input type="checkbox"/> Change <input type="checkbox"/> Add
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

200002290422-9
 -09/11/97--01074--002
 *****558.75 *****558.75

9-10-97

14. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or in an attachment with an address.