

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

0003308

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # V37116</b> 1. Corporation Name <b>BRICK ENTERPRISES, INC.</b>			
Principal Place of Business <b>ORLANDO FITNESS AND RACQUET CLUB 825 COURTLAND ST. ORLANDO FL 32804 US</b>		Mailing Address <b>825 COURTLAND STREET ORLANDO FL 32804 US</b>	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
3. Date Incorporated or Qualified <b>05/19/1992</b>		4. FEI Number <b>59-3126232</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>BRICK, JOHN C. ORLANDO FITNESS AND RACQUET CLUB 825 COURTLAND STREET ORLANDO FL 32804</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <b>300002918473--3</b> 83 -06/29/99--01034--017 84 City <b>****158.75 FL ****158.75</b>	
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRICK, JOHN C. 917 WARBLER CT. PORT ORANGE FL 32127	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRICK, LOURDES G. 917 WARBLER CT. PORT ORANGE FL 32127	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRICK, C. VICTOR 2003 DUMONT RD TIMONIUM MD 21093	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRICK, LYNNE G 2003 DUMONT RD TIMONIUM MD 21093	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD BRICK, MERRILL J. 5500 KINGSWOOD DR ORLANDO FL 32810	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRICK, SHERRY C. 5500 KINGSWOOD DR ORLANDO FL 32810	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 is true 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: John C. Brick, John C. Brick 6/14/99 (407) 643-3550

CR2E034 (11/98)



THE ORLANDO FITNESS & RACQUET CLUB

John C Brick  
825 Courtland Street  
Orlando, FL 32804

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June 16, 1999

To Whom It May Concern:

The reason the our payment has arrived to you late due to an illness of my wife which has taken up all of my time and has taken me away from the business. Unfortunately, I am the one that takes care of all of the accounts payables. I would appreciate your understanding in this matter and hopefully this can be resolved. If you have any further questions in this matter please feel free contact my assistant Christa Chandler at 407-645-3550.

Yours in Health,

John C. Brick