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

POCUMENT # V51350

(9)

B & R SPUR, INC.

Principal Place of Business Mai

2991 66TH STREET NORTH ST. PETERSBURG FL 33710 2991 66TH STREET NORTH

Mailing Address

FILED May 09 1997 8:00am Secretary of State



| st. Petersbu | RG FL 33710 | ST. PETERSBURG FL 33710-3128 | | | | | | | |
|--------------------------|--|---|---|-------------------|----------------------------------|---|-------------------------|-------------------------------|--------------------------------------|
| | | | | | | 3. Date Incorporated or Qualified 07/16/1992 | | te of La | st Report |
| 2. Principal F | Place of Business | 2a. Mailing Address 26 | | | 4. FET Number 59-3131898 | | | Applied For Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apl. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | | |
| City & Stat | e | City & State 28 | | | | Election Campaign Financing Trust Fund Contribution | | | 00 May Be ded to Fees |
| Zip 24 | Country 25 | Zip 29 | 30 Cou | ntry | | | Yes [|] No | er s. 199.032, |
| | 9. Name and Address of Currer | nt Registered Agent | | | r | 10. Name and Address of New Reg | istered A | gent | |
| PER | OZZI, HERBERT L., JR. | | | 81 | Name | | | | |
| | 66TH STREET NORTH | | - | 82 | Stroot Add | dress (P.O. Box Number is Not Acceptab | (0) | | |
| | PETERSBURG FL 33710 | | | 83 | Olicel Add | aress (F.O. Dox Number is Not Acceptab | | | |
| | | | | 84 | City | | | 85 | Zip Code |
| | | | | \perp | | | FL | | |
| office or a agent. La | to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the oblig | i2 and 607.1508, Florida 8 of Florida. Such change ations of, Section 607.050 | statules, the ab was authorized 5, Florida Stat | ove by ules | rnamed cor the corpora 3. | poration submits this statement for the pation's board of directors. I hereby accep | urpose of t the appo | changi pintmen | ng its registered I as registered |
| SIGNATURE | Signature, lyped or printed name of registered age | nt and title if applicable | (NOTC Registered | LÁgri | nt signature re qu | rred when reinstating) | DATE | | |
| 12. | OFFICERS AN | D DIRECTORS | 13. | | <u></u> | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIREC | TORS IN 12 |
| TITLE | PTS | DELET | E 111H | LΕ | | | | Chai | nge Addition |
| NAME | PEROZZI, HERBERT L. JR | | 1,2 NA | ME | Ì | | | | |
| STREET ADDRESS | 2991 68TH ST N. | | 1.3 \$1 | REE1 | ADDRESS | | | | |
| CITY-ST-ZIP | ST PETE FL | | 1.4 CR | Y-S | 1-7HP | | | | |
| TITLE | | DELETI | | _ | | | | Char | nge Addition |
| NAME | | | 2.2 NA | ME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | 2. 4 CI | | | | | | |
| TITLE | | DELETI | | | | | | Char | nge 🔲 Addition |
| NAME | | | 3.2 NA | ME | | | | | |
| STREET ADDRESS | | | 3.3 \$11 | REET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CI | 1Y-S | i1 - ZIP | | | | |
| TITLE | | DELET(| | | | | | Char | ige Addition |
| NAME | | | 4. 2 N/ | IME | | | | | |
| STREET ADDRESS | | | 4.3 S1 | REE1 | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 011 | Y - S1 | 1- ZIP | | | | |
| TOLE | | DELE16 | 5.1 T/T | LE | | | | Char | ige 🔲 Addition |
| NAME | | | 5.2 NA | ME | | | | | |
| STREET ADDRESS | | | 5.3 \$16 | RÉET. | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CIT | Y-\$1 | 7-21P | | | | |
| TITLE | | ☐ DELETI | | | <u>†</u> | | | Char | ige Addition |
| NAME | | | 6.2 NA | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| City-ST-ZIP | | | 6.4 CH | | | | | | |
| | by certify that the information supplie | d with this filing door not | | | | d in Section 110 07(2)(i) Elected Statuton | Lituribox | oortiku l | ibat the |

4. 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; 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.

CIGNATURE

16 Part VI

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as. 4-29-97

813-528-0868