

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15615

**Entity Name:** BRER SERVICES INC.

**Current Principal Place of Business:**

150 HARVESTER DRIVE  
SUITE 201  
BURR RIDGE, IL 60527

**Current Mailing Address:**

150 HARVESTER DRIVE  
SUITE 201  
BURR RIDGE, IL 60527 US

**FEI Number:** 22-2785461

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           WILLIAMS, KENT  
Address        39 WYNFORD DRIVE  
City-State-Zip: TORONTO M3C 3K5

Title           ASSISTANT VICE PRESIDENT  
Name           FEDORKA, LISA  
Address        150 HARVESTER DRIVE  
                  SUITE 201  
City-State-Zip: BURR RIDGE IL 60527

Title           DIRECTOR  
Name           MORRIS, TRACI  
Address        150 HARVESTER DRIVE  
                  SUITE 201  
City-State-Zip: BURR RIDGE IL 60527

Title           DIRECTOR  
Name           BALLOT, RICHARD  
Address        150 HARVESTER DRIVE  
                  SUITE 201  
City-State-Zip: BURR RIDGE IL 60527

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LISA FEDORKA

AVP

04/06/2017

Electronic Signature of Signing Officer/Director Detail

Date