COR ANNL	PROFIT PORATION JAL REPORT 1996	ı 🚱		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					
DOCUMENT # V32438 (6)									
BRODCO, INC.						E 1001 O 1000 SILIE (201 O 000 )		B <b>a</b> ranan ata	I BIBII 848() IBBI
Principal Place	of Business	Mail	ng Address						
2001 NE 200 NORTH MIAI			001 NE 208 TERRA ORTH MIAMI FL 3:						
	SINESS & MAILING		,	FECTI	VE: 5/1/96	3. Date Incorporated or Qualified 04/29/1992 4. FEI Number	1	e o' Last R <b>)2/17/19</b>	95
· ·	ace of Business  KANE CONCOURSE	<b>├</b> 1	Mailing Address	CONCO	URSE	65-0423681		<b>⊢</b> →	Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	001100		5. Certificate of Status Desired	Г1	\$8.75	Additional
2 SUITE City & State			SUITE 310. Dity & State	ne 2000 ini i					Required
·y	ARBOR ISLANDS, F		BAY HARBOR	ISLA	NDS	6. Election Campaign Financing Trust Fund Contribution			<b>0</b> May Be d to Fees
Zip 4 33154	Country USA	29 3	33154	Co	ountry USA	1	es 🔲 No		199.032,
	9. Name and Address of	Current Registe	red Agent		81 Name	10. Name and Address of New	Registered	Agent	
INTRAS	TATE REGISTERED AGEN	T CORPORATION	ON		82 Street Addre	ess (P.O. Box Number is Not Accept	ableì		
701 BRI	ickell ave.								
MIAMI F	FL 33131				83				
					84 City		FL	85 Z	p Code
or registere	o the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations of	of Florida. Such e	hange was author	ized by the	ove named corpora corporation's boar	ation submits this statement for the p d of directors. Thereby accept the an	urpose of ch ppointment as	anging its r registered	egistered office agent. Lam
SIGNATURE _	·					-			
12.	Signature, typied or printed name of register OFFICEI	red agont and title II app RS AND DIRECTO		13	at Agent signal are reviewed	ADDITIONS/CHANGES TO O	FICERS ANI	DIRECTO	RS IN 12
TITLE	D		DELETE	1 1	HILE			Change	Addition
NAME	BROD, GEORGE				NAME				
STREET ADDRESS	2801 NE 208 TERR. NORTH MIAMI FL				STREET ADDRESS				
CITY-ST-ZIP TITLE	HODITI MIMMI FE		DELETE		CITY-ST-ZIP TITLE			Change	Addit on
NAME			_		NAME			_	
STREET ADDRESS				23	STREET ADDRESS				
CHTY-ST-ZIP					CITY-ST-ZIP			==	
TITLE			DELETE		101.6			☐ Change	ne tibbA 📋
NAME STREET ADDRESS					NAME STREET ADDRESS				
DITY-ST-ZIP					CHY-SI-ZIP				
TITLE			DELETE		IITLE			Change	Addition
NAME				4.2	NAME				
STREET ADDRESS					STREET ADDRESS				
CITY-ST-ZIP			DELETE		CHY-S1-7P			Change	☐ Addition
TITLF NAME			L DECEM		TITLE NAME			onengs	☐ Addition
					STREET ADDRESS				
STREET AUDRESS T									
					DITY - ST - Z-P				
STREET ADDRESS CITY-ST-ZIP TITLE		APPEN PRIMER IN SAMERANIA PRIMER STATE OF STATE	DELETE	5.4 6.1			<u>.                                  </u>	☐ Change	☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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, of or an attachment with an address.

SIGNATURE:

GEORGE BROD

305-931-1977

6.3 STREET ADDRESS 6.4 City-St-7iP

SIGNATURE: \_\_

STREET ADDRESS

CITY - ST - ZIP

GEORGE BROD SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/96

305-931-1977