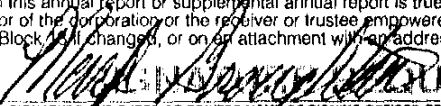


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000000342 (3) 1. Corporation Name BROUGHTON INTERNATIONAL INC.			
Principal Place of Business BARNETT TOWER, STE. 420 100 SECOND STREET, N. ST. PETERSBURG FL 33701 US		Mailing Address 100 SECOND STREET, N. PO BOX 8342 SUITE 720 ST. PETERSBURG FL 33731 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 PO BOX 3343 27 Suite, Apt. #, etc. 28 ST PETERSBURG FL 29 33731-3343 30 USA	
3. Date Incorporated or Qualified 01/04/1994		3a. Date of Last Report 05/01/1996	
4. FEI Number 59-3217006		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent BROUGHTON, JAMES BARNETT TOWER SUITE 720 ONE PROGRESS PLAZA ST. PETERSBURG FL 33701		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3900 9TH STREET N 83 84 City ST PETERSBURG FL 85 Zip Code 33703	
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 PD ☐ DELETE NAME BROUGHTON, JAMES E STREET ADDRESS 100 SECOND STREET, N. CITY-ST-ZIP ST. PETERSBURG FL	1.1 TITLE ☒ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 3900 9TH STREET N 1.4 CITY-ST-ZIP ST PETERSBURG FL 33703	2.1 TITLE ☒ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 3900 9TH STREET N 2.4 CITY-ST-ZIP ST PETERSBURG FL 33703	
TITLE STD ☐ DELETE NAME BROUGHTON, KAY T STREET ADDRESS 100 SECOND STREET, N. CITY-ST-ZIP ST. PETERSBURG FL	3.1 TITLE ☒ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3900 9TH STREET N 3.4 CITY-ST-ZIP ST PETERSBURG FL 33703	4.1 TITLE ☒ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 3900 9TH STREET N 4.4 CITY-ST-ZIP ST PETERSBURG FL 33703	
TITLE V ☐ DELETE NAME BROUGHTON, MARK D STREET ADDRESS 100 SECOND STREET, N. CITY-ST-ZIP ST. PETERSBURG FL	5.1 TITLE ☒ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 3900 9TH STREET N 5.4 CITY-ST-ZIP ST PETERSBURG FL 33703	6.1 TITLE ☒ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 3900 9TH STREET N 6.4 CITY-ST-ZIP ST PETERSBURG FL 33703	
TITLE V ☐ DELETE NAME BROUGHTON, JAMES E JR. STREET ADDRESS 100 SECOND STREET, N. CITY-ST-ZIP ST. PETERSBURG FL			
TITLE V ☐ DELETE NAME DELUCIA, BROOKE A JR. STREET ADDRESS 100 SECOND STREET, N. CITY-ST-ZIP ST. PETERSBURG FL			
TITLE V ☐ DELETE NAME BROUGHTON, MATTHEW S JR. STREET ADDRESS 100 SECOND STREET, NO. CITY-ST-ZIP ST. PETERSBURG FL			
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; 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, as changed, or on an attachment with an address.			
SIGNATURE:  REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E034 (9/96)