2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 556313

FILED Apr 28, 2004 Secretary of State

Entity Name: BROWARD ENGINEERING ASSOCIATES, INC.

Current Principal Place of Business: New Principal Place of Business:

409 N.E. 29TH STREET WILTON MANORS, FL 33334

Current Mailing Address: New Mailing Address:

409 N.E. 29TH STREET WILTON MANORS, FL 33334

FEI Number: 65-0001677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TURILLO, HARRIET
409 NE 29TH STREET
WILTON MANORS, FL 33334
FASS, HARRIET
409 NE 29TH STREET
WILTON MANORS, FL 33334
WILTON MANORS, FL 33334

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: HARRIET FASS 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 TURILLO, HARRIET,
 Name:
 FASS, HARRIET,

 Address:
 409 NE 29TH STREET
 Address:
 409 NE 29TH STREET

 City-St-Zip:
 WILTON MANORS, FL
 City-St-Zip:
 WILTON MANORS, FL

Title: P () Delete Title: () Change () Addition Name: FASS, PAUL, Name:

Address: 409 N.E. 29TH ST. Address: City-St-Zip: WILTON MANORS, FL City-St-Zip:

Title: V () Delete Title: () Change () Addition Name: POHL, JAMES Name:

Address: 1413 SW 1ST AVE Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip:

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 BROWN, JOHN

 Address:
 Address:
 5 MENDOTA LANE

City-St-Zip: City-St-Zip: SEA RANCH LAKES, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARRIET FASS ST 04/28/2004