Suite, Apt. #, etc.       1st MOORE       CR2E034 (10/04)         City & State       City & State       4. FEI Number       Applied F         Tampa, Florida       Tampa, Florida       Southard F       Applied F         Zip       Country       Zip       Country       S. Certificate of Status Desired       \$8.75 Additional Fee Required         33624       USA       33688       USA       S. Certificate of Status Desired       \$8.75 Additional Fee Required         GIBBONS, TUCKER, MILLER, WHATLEY & STEIN 101 E. KENNEDY BLVD., SUITE 1000       Name       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code	ANNUAL REPORT (AR) DOCUMENT # F00084 1. Entity Name						Feb 07, 2005 8:00 am Secretary of State	
13901 LAKE BLUFF CT US       P.O. BOX 271083 US       Image: Comparison of the states of the	J.J. BRO	DERICK COMPA	NY, INC.				02-07-2005 90043 02	7 ***150.00
TAMPA FL 33624       TAMPA FL 33688         2. Principal Place of Budiness       3. Mailing Address         2. Principal Place of Budiness       3. Mailing Address         13901. Lake Bluff Court       Sub Abil A etc.         City & State       Country         Zip       Country         Zip       Country         Zip       Country         State Abil Appl.       Name and Address of New Registered Agent         Name And Address of New Registered Agent       State Abil Appl.         City       FLE         Andres Abil Appl.       State Abil Appl.         City       FLE         Andres Abil Appl.       State Abil Appl.         Other Abil Appl.       None         State Abil Appl.       None         State Abil Appl.       Cobin Number In State Appl.	Principal Plac	 ce of Business		Mailing Address	1			
13901. Lake Bluff Court     P.O. Box 271083       Sule. Apt. 4. etc.     1st MOORE       Corr & Sale     Corr & Sale       Tampa, Florida     Tampa, Florida       Apple Florida     Tampa, Florida       Jago Jago Jago Jago Jago Jago Jago Jago	TAMPA FL 33624			TAMPA FL 33688				···· •···· •···· •····
13901. Lake Bluff Court     P.O. Box 271083       Sule. Apt. 4. etc.     1st MOORE       Corr & Sale     Corr & Sale       Tampa, Florida     Tampa, Florida       Apple Florida     Tampa, Florida       Jago Jago Jago Jago Jago Jago Jago Jago	2. Principal F	Place of Business		3. Mailing Address				
Tampa, Florida         Tampa, Plorida         S2-080312         Iest Additional           Zip         Country         36.04         USA         Country         Name and Address of New Registered Agent           33624         InterNee MILLER, WHATLEY & STEIN         Name         Name         Steet Address (P 0. Box Number is Not Acceptable)         Country         Coun			Court		71083		I MARKEN (II) KRIII) KRIII ARINI KRIII ARINI KRIII AINI V.	1811 81811 81811 81811 81811 81 11 181
Zip         Country         Zip         Country         S.         Certificate of Status Desired         S8.75 Additional           33624         IISA         33688         UISA         I. Name and Address of New Registered Agent         7. Name and Address of New Registered Agent           6. Name and Address of Current Registered Agent         7. Name and Address of New Registered Agent         Name           101 E. KEINNEDY BLVD, SUITE 1000         P.O. BOX 1363         Street Address (P.O. Box Number is Not Acceptable)         FL         Zip Code           8. The above named entity submits Bits statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Lan femiliar with, and acceptable         Ot/E         Zip Code           SIGNATURE         Execute, rade crimet were digent codes.         (ht/E Registered Agent system shower instature)         Diff           SIGNATURE         Execute, rade crimet were digent codes.         (ht/E Registered Agent system shower instature)         Diff         Zip Code           SIGNATURE         Execute Agent control to the Leadeshie         (ht/E Registered Agent system shower instature)         Diff         Signation agent code to field Control to the Acceptable)         Diff           SIGNATURE         Check Rayable to Florida Department of State         (ht/E Registered Agent system codes to field Control to the Acceptable)         Diff         Addud to Fe					rida	····	4. FEI Number 52-0803142	وي المحمد الم
GIBBONS, TUCKER, MILLER, WHATLEY & STEIN 101 E. KENNEDY BLVD, SUITE 1000 P.O. BOX 1383 TAMPA FL 33601     Street Address (P.O. Box Number is Not Acceptable)       City     FL     Zip Code       8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and ac the obligations of registered agent.     Street Address (P.O. Box Number is Not Acceptable)       SIGMATURE     City     FL     Zip Code       Sigma Turker     City     FL     Difference       Sigma Turker     City     Sigma Turker     Difference       Sigma Turker     City     FL     Difference       Sigma Turker     City     Sigma Turker     Difference       Sigma Turker     City     Sigma Turker     Difference       Sigma Turker     City     Sigma Turker     Difference       Sigma Turker     Differen		4 US	SA	Zip 33688	Countr			Fee Required
101 E. KENNEDY BLVD., SUITE 1000       Street Address (P.O. Box Number in Not Accessitable)         P.O. BOX 1363       City       FL       Zp Code         a. 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. Lam familiar with, and ac the obligations of registered agent.       FL       Zp Code         SIGNATURE		6. Name and Age	iress of Current	L Registered Agent		Name	7. Name and Address of New Registere	ad Agent
TAMPA FL 33601       City       FL       Zip Code         8. The above named anity submits this statement for the purpose of changing its registered agent, or both, in the State of Plorida. I am familiar with, and ac the obligations of registered agent.       Tam familiar with, and ac the obligations of registered agent.         SIGNATURE	101	E. KENNEDY E			F	Street Address (P.O. Box Number is Not Acceptable)		
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. I am familiar with, and ac the obligations of registered agent.  SIGNATURE  SIGNATURE					F			
					F	City .	<u> </u>	Zip Code
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HAME       BRODERICK, F.E.       NAME         SIRET ADDRESS       5507 WESTBARD AVE.       SIRET ADDRESS         CITY-ST-2P       BETHESDA MD       CITY-ST-2P         ITTLE       D       Delete       TILE         NAME       BUCHANAN, R.Â.       SIRET ADDRESS         SIRET ADDRESS       10638 WEYMOUTH ST.       CITY-ST-2P         BETHESDA MD       CITY-ST-ZP         BETHESDA MD       CITY-ST-ZP         ITTLE       ST       Delete         ITTLE       BETHESDA MD       CITY-ST-ZP         ITTLE       D       Delete         ITTLE       D       ITTLE         STREET ADDRESS       SGOT WESTBARD AVENUE       CITY-ST-ZP         ITTLE       D       Delete       NAME         STREET ADDRESS       SGOT WESTBARD AND       CITY-ST-ZP         ITTLE       D       Delete <td< td=""><td>STREET ADDRESS</td><td>13901 LAKE BLUF</td><td>FCT</td><td></td><td>STREET</td><td>T ADDRESS</td><td></td><td></td></td<>	STREET ADDRESS	13901 LAKE BLUF	FCT		STREET	T ADDRESS		
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Intername       Defete       Intername       Defete       Intername         NAME       BRODERICK, M.T.       STREET ADDRESS       STREET ADDRESS       CITY-ST-ZIP         Intername       Defete       Intername       Change       Addition of the reserver of trustee empowered to execute this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the information or the receiver of trustee empowered to execute this report of supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the information of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the receiver of trustee empowered to execute this report of supplemental reports in Block 10 or Block	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	BETHESDA MD D BUCHANAN, R.Â. 10638 WEYMOUTI BETHESDA MD ST	H ST.	·	STREET CITY-S TITLE NAME STREET CITY-S TITLE	T ADDRESS S1- ZIP 1 ADDRESS S1- ZIP		
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indicated on this report or supplemental 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 direct 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 10 or Block	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	BETHESDA MD D BUCHANAN, R.Â. 10638 WEYMOUTH BETHESDA MD ST BRODERICK, F. E. 5507 WESTBARD BETHESDA MD D BRODERICK, M.T. 5308 AUGUSTA S BETHESDA MD D	H ST.	Delete     Delete     Defete	STREET CHY-S TITLE NAME STREET CHY-S TITLE NAME STREET CHY-S TITLE NAME STREET CHY-S	T ADDRESS S1- ZIP T ADDRESS S1- ZIP T ADDRESS S1- ZIP T ADDRESS S1- ZIP		Change Ad
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