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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 F96000001806 (6) DOCUMENT # **BROKERS COMMITMENT CORPORATION** 

**FILED** Apr 27 1998 8:00am



Principal Place of Business Mailing Address 11440 ISAAC NEWTON SO NO 11440 ISAAC NEWTON SW NO STE #110 STE #110 RESTON VA 20190 RESTON VA 20190 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/10/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 2431 Aloma Ave 94-2968310 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired #217 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Winter Park, FL 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible US 21 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLOWERS, MARY CORPORATION SERVICE COMPANY 62 Street Address (P.O. Box Number is Not Acceptable) 1205 HAYS ST TALLAHASSEE FL 32301 83 City 85 Zip Code 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 holh, 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 Signatura, typod or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE HOFF, STEPHEN Z Jackson, Fred C. NAME 1.2 NAME 122 N UNION ST STREET ADDRESS 1766-E Springfield Ave 1.3 STREET ADDRESS **ALEXANDRIA VA 22314** CITY-ST-ZIP New Providence, NJ 07974 1.4 CITY-ST-ZIP THILE DELETE Addition 21 TITLE Change Secretary HOFF, STEPHEN Z NAME 2.2 NAME Kimberly S. Christo 122 N UNION ST STREET ADDRESS 2.3 STREET ADDRESS 2328 Nebraska Ave., NW ALEXANDRIA VA 22314 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Washington, DC 20016 TITLE X DELETE 3.1 TITLE Change Addition HOOFF, JOHN C H JR NAME 32 NAME 2107 FOREST HILL RD STREET ADDRESS 3.3 STREET ADDRESS ALEXANDRIA VA 22307 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition HAYES, JAMES NAME 4.2 NAME 5316 SENTRY STREET ADDRESS 4.3 STREET ADDRESS **WOODBRIDGE VA 22193** CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETÉ 51 TITLE Addition Channe COPELAND, BARBARA NAME 5.2 NAME 4819 KING SOLOMON DR STREET ADDRESS 5.3 STREET ADDRESS ANNANDALE VA 20013 CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE ☐ Change Addition MARINOFF, MORMAN s/b spelled Norman NAME 6.2 NAME STREET ADDRESS 221 W ST RD 6 3 STREET ADDRESS **FEASTERVILLE PA 19053** 

14. I 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 if changed, or on a attachment with an address

SIGNATURE:

4/8/98