FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

- PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham 👡 Secretary of State DIVISION OF CORPORATIONS

1996

G76439 **DOCUMENT #** 1. Corporation Name

(0)

PEM	BROKE VALCO, INC.						
Principal Place	of Business	Mailing Address				{	IBAN BUBIN BEBIN BUBIN AKBAN BUBIN NUBA
% BERNARD A. SINGER. P.A. 4700 SHERIDAN ST., BUILDING B HOLLYWOOD FL 33021-3416		% BERNARD A. SINGER. P.A. 4700 SHERIDAN ST., BUILDING B HOLLYWOOD FL 33021-3416			Date of Last Report		
9 Principal Pt	ace of Business	2a, Mailing Address				12/29/1983 4. FE: Number	02/27/1995 Applied For
21		26		59-2370436	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc	iuite, Apt. #, etc				\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Man Added to Fees		
Zip	······································		Cour	Country		8. This corporation has liability for intengible	
24	25	F, F, F,		<u> </u>		Florida Statutes 🔲 Yes 🔣 No	
	g. Name and Address of Currer	nt Registered Agent		r		10. Name and Address of New Register	ed Agent
1 00,00				B1	Name		
	er, bernard a. Sheridan street, bldg. b		Į.	82	Street Acidr	Acidress (P.O. Box Number is Not Acceptable)	
	YWOOD FL 33021		<u> </u>	83			
			ļ.	84	City		85 Zip Code
famiriar wi	to the provisions of Sections 607,0502 ed agent, or both, in the State of Flori- th, and accept the obligations of, Sect Signature, typed or printed name of registered agent	ion 607.0505, Florida Statute	5.			ration submits this statement for the purpose of rd of directors. Thereby accept the appointment when the statement of the appointment of the statement of the	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD	DELETE	1.170	LF	· T	☐ Change ☐ Addition	
NAME	VALLADARES, RENE		1.2 NA	ME			
STREET ADDRESS	5430 N. 37TH STREET HOLLYWOOD FL		1		DDRESS		
CITY-ST-ZIP TITLE	HOLLTWOOD PL	DELETE	1.4 CH 2 1 Til		- Zif'		Change Addition
NAME		C) better	2 2 NAM				[] printings [] vegition
STREET ADDRESS					ODRESS		
CITY-ST ZIP			2 4 CIT				
TillE	☐ DELEJE		3 1 711	3 1 TILLE			Change Addition
NAME			3 2 NAI	ME			
STREET ADDRESS					ADDRESS		
CITY - ST - ZIP THILE		□ DELEJE	3.4 CIT 4. 1 TIT		- ZIF'		Change Addition
NAME		[] виси	4.1111 4.2 NA				[] change [] Routton
STREET ADDRESS			1		DDRESS		
CITY-S1-ZIP			4.4 CII			00000176;76 -04/03/9601016	52:0
11†L f		☐ DELETE	5 1 TITEE			-04703/3601016	-M2change Addition
NAME			5 ? NAI	ME		***400.00	
STREET ADDRESS					IDDRESS		
CITY-ST-ZIP		רוונונוו	5.4 CIT		- ZIP		Change - Addition
TITLE		DELETE	6 1 TIT 6 2 NAT				Change Addition
NAME STREET ADDRESS					DDRESS		
City-St-7iP			6 4 CII				

14. Too 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), 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 12 if changed, or on an altagriment with an address.

SIGNATURE:

ME OF SIGNING OFFICER OR DIRECTOR

(954) 985-8600

FILED

Secretary of State

Apr 02 1996 8:00 am