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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # K79152**

1. Corporation Name

BROWARD BUS SHELTERS, INC

Principal Place	e of Business	Mailin	g Address				ĺ	1 indicated and space states states	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
6081 S.W. 30TH	I COURT		OX 292037									
FT. LAUDERDAL	LE FL 33314	SUITE						DO NOT WR	ITE IN THIS	SPACE		
US		US	FL 33329				2	Date Incorporated or Qualifed		OF AUL		
		00					\ <b>3</b> .	04/03/1989				
2 Principal Pl	lace of Business	2a Mi	ailing Address	_			4.	FEI Number			Appli	ed For
		26	alling riddress				"	65-0203145				pplicable
Suite, Apt.	# etc		uite, Apt. #, etc.							\$8.7		ditional
22	<i>m</i> , 0.0.	27					5.	. Certifcate of Status Desired		•	Requ	
City & State			ity & State				6.	. Election Campaign Financing		\$5.	00 м	av Be
23	_	28	•				<b>.</b>	Trust Fund Contribution			led to I	
Zip	Country	Ziç	p	Cour	ntry		8.	. This corporation owes the cur	rent year Inta	angible		
24	25	29		30			1	Personal Property Tax.		☐ Yes		No No
1	9. Name and Address of Curr	ent Registere	ed Agent				10.	. Name and Address of New	Registered A	Agent		
					81	Name						
	TLEY, PETER A			ŀ	82	Street Add	ress (F	P.O. Box Number is Not Accept	table)			
	E. ATLANTIC BLVD							<u> </u>				
	E 410			[	83							
POM	IPANO BEACH FL 33062			}	84	City				85	Zip Co	de
						•			FL		·	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.	1508, Florida Statut	es, the ab	ove	-named corp	poratio	on submits this statement for the	purpose of	changing	g its re	gistered
office or n	egistered agent, or both, in the Statem familiar with, and accept the oblig	te of Florida. Se	Such change was a ection 607.0505. Flo	iuthorized irida Statu	by t ites.	ne corporati	ion s b	loard of directors, i hereby acce	рстве арроп	ilineni a	s regis	itereu
		<b>_</b>	•									
SIGNATURE	Signature, typed or printed name of registered a	agent and title if app	plicable. (NOTE	: Registered	Agent	signature requir			DATE			
12.	OFFICERS A	AND DIRECT		13.		·····		ADDITIONS/CHANGES TO OF	FFICERS AN			
TITLE	S		☐ DELETE	1.1 TIT	LE					Char	nge	Addition
• NAME	FORMAN, CHRISTIE			1.2 NA	MC							
STREET ADDRESS	6081 SW 30TH CT			В	UVIL							
CITY-ST-ZIP	FT LAUDERDALE FL			1.3 ST		ADDRESS						
<sup>●</sup> TITLE	PD DELETE			1.3 STF 1.4 CIT	REET							F=1
NAME	PD		☐ DELETE	•	REET A					Cha	nge	Addition
	PD   Flutie, Glenn		☐ DELETE	1.4 CIT	REET / IY-ST- ILE		<del></del> .			Cha	nge	Addition
STREET ADDRESS	l ·		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA	REET A TY-ST- TLE JME		<del></del>			Cha	nge	Addition
STREET ADDRESS CITY-ST-ZIP	FLUTIE, GLENN		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA	REET A TY-ST- TLE UME REET,	-ZiP ADDRESS	<del></del>					
	FLUTIE, GLENN 6081 SW 30TH CT		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI	REET A TY-STA TLE AME REET A	-ZiP ADDRESS				Char		☐ Addition
CITY-ST-ZIP	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON			1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI	REETA TY-ST- TLE AME REETA TY-ST	-ZiP ADDRESS						
CITY-ST-ZIP TITLE	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D			1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA	REET A TY-ST- TLE AME REET A TY-ST TLE	-ZiP ADDRESS						
CITY-ST-ZIP TITLE NAME	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON		[] DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA	REET A TY-ST- TLE AME REET A TY-ST TLE AME	-ZIP  ADDRESS  1-ZIP  ADDRESS	-			☐ Chat	nge	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT			1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI	REET, TY-ST- TLE TY-ST TLE TME TY-ST TLE TREET, TY-ST	-ZIP  ADDRESS  1-ZIP  ADDRESS					nge	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT		[] DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4. CI	REET/ IY-ST- ILE REET/ ITY-ST ILE REET/ ITY-ST	-ZIP  ADDRESS  1-ZIP  ADDRESS				☐ Chat	nge	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT		[] DELETE	2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4 CI 4.1 TIT 4.2 NA	REET, ITY-ST-TLE REET, ITY-ST LE REET, ITY-ST LE REET, ITY-ST LE REET, ITY-ST LE AME	-ZIP  ADDRESS  1-ZIP  ADDRESS				☐ Chat	nge	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT		[] DELETE	2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4 CI 4.1 TIT 4.2 NA	REET, ITY-ST- ILE IMME REET, ITY-ST ILE IME REET, ITY-ST ILE ITY-ST IT	ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS				☐ Chai	nge	Addition . Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT		[] DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4. CIT 4.1 TIT 4.2 NA 4.3 STI	REET A IY-ST ILE IME REET A ILE ITY-ST ILE ITY-ST ILE REET A ILE ITY-ST ITY-ST	ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS				☐ Chat	nge	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT	REET A ITY-ST- ILE REET A ITY-ST ILE REET A ITY-ST ILE ITY-ST ILE	ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS				☐ Chai	nge	Addition . Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT DAVIE FL		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4, CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NA	REET A ITY-ST ILE REET A ITY-ST ILE REET A ITY-ST ILE A ITY-ST ILE ITY-ST ILE ITY-ST ILE ITY-ST ILE	ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS				☐ Chai	nge	Addition . Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT DAVIE FL		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4, CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NA	REET I IY-ST- ILE MME REET I ILE MME REET I ITY-ST ILE IMME REET I ILE	-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS -ZIP  ADDRESS				☐ Chai	nge	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT DAVIE FL		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CI 3.1 TIT 3.2 NA 3.3 STI 4.4 CIT 4.1 TIT 5.2 NA 5.3 STI	REET / ILE  ME	-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS -ZIP  ADDRESS				☐ Chai	nge	Addition . Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CONTROL OF THE	FLUTIE, GLENN 6081 SW 30TH CT DAVIE FL D OLIVER, ALISON 6081 SW 30TH CT DAVIE FL		☐ DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4, CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NA 5.3 STI 5.4 CIT 5.4 CIT	REET / Y-ST- ILE  MME  REET / TY-ST  ILE  TY-ST  ILE	-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS -ZIP  ADDRESS				☐ Chai	nge	Addition Addition

CITY-ST-ZIP 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 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

4-78-99

Daytime Phone #