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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L00118

(4)

BROWARD LIGHTING CORP.

RP.

FILED Feb 03 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 8301 NORTHEAST 6TH AVENUE 9301 NORTHEAST 6TH AVENUE MIAMI SHORES FL 33138 MIAMI SHORES FL 33138-285								
					3. Date Incorporated or Qualified 07/05/1989	3a. Date of 03/28/1		eport
2. Principal Plat 21	ce of Business	2a. Mailing Address 26			4. FEI Number NOT APPLICABLE) , , , , , , , , , , , , , , , , , , , 	plied For t Applicable
Suite. Apt. #.	, otc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	8.75 / Fee Re	Additional quired
City & State		City & State	·	The second	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be
Ζφ 24	Country 25	Zip 29	Count	гу	8. This corporation has liability for		under s.	
	9, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Ager	nt	
FREE	DMAN, JOE		8	1 Name				
9301	NORTHEAST 6TH AVENUE I SHORES FL 33138		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	ble)		
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			<u> </u>	4 City		100	- 1 - 7: (Codo
			*	4 City		FL 85	Zipi	Code
SIGNATURE SI	dignature, typed or printed name of registered ag				ation's board of directors. I hereby accelulation's board of directors. I hereby accelulations are street when reinstating).	DATE	· · · · · · · · · · · · · · · · · · ·	
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1. Ido 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 eath; that I am an officer or director of the coproration 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, expin an attachment with an address.

SIGNATURE: X SIGNATURE AND THE

PANAPED NAME OF SIGNING OFFICER OR DIRECTOR

(23/47

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