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May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L89414

(1)

1. Corporation Name

THE BROWARD TIMES, INC.

Principal Place of Business

1001 W. CYPRESS CREEK RD.
SUITE 111
FT. LAUDERDALE FL 33309
US

Mailing Address

1001 W. CYPRESS CREEK RD.
SUITE 111
FT. LAUDERDALE FL 33309-1947
US

3. Date Incorporated or Qualified
07/24/1990

3a. Date of Last Report
08/08/1996

2. Principal Place of Business

21 11905 W. Sample Rd.

City, Apt. #, etc.

22 Coral Springs, FL

City & State

23 33065

Zip

Country

25 USA

2a. Mailing Address

26 11905 W. Sample Rd.

City, Apt. #, etc.

27 Coral Springs

City & State

28 FL

Zip

Country

29 33065

30 USA

4. FEI Number

65-0268375

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fees Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CLAYBORNE, KEITH A.
1001 W. CYPRESS CREEK RD.
SUITE 111
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name Keith A. Clayborne
82 Street Address / P.O. Box Number (Not Applicable)
11905 W. Sample Rd.
83 Coral Springs, FL.
84 City
85 Zip Code FL 33065

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 both, 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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

3/24/97

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D CLAYBORNE, KEITH A.
6288 NW 42ND COURT
CORAL SPRINGS FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D HOWTON, THERON
382 CENTRAL PARK W. S-15
NEW YORK NY

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D CLAYBORNE, BERNADETTE P.
6288 NW 42ND COURT
CORAL SPRINGS FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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.

3/24/97

3/24/97

(060) 245 1822

CR2E034 (9/96)