

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M47995

FILED
Apr 25, 2002 8:00 AM
Secretary of State

Entity Name: BROWARD DISCOUNT INSURANCE & TAGS, INC.

Current Principal Place of Business:

4930 N.PINE ISLE RD.
LAUDERHILL, FL 33351

New Principal Place of Business:

Current Mailing Address:

4930 N.PINE ISLE RD.
LAUDERHILL, FL 33351

New Mailing Address:

FEI Number: 59-2779226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, DIANA
4930 N PINE ISLAND RD
LAUDERHILL, FL 33351 US

Name and Address of New Registered Agent:

LEVIN, DIANA E PRES
4930 N PINE ISLAND RD
LAUDERHILL, FL 33351 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DIANA E LEVIN

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEVIN, DIANA,
Address: 4930 N. PINE ISLAND RD
City-St-Zip: LAUDERHILL, FL

Title: STD () Delete
Name: LEVIN, ROBERT,
Address: 4930 N. PINE ISLAND RD
City-St-Zip: LAUDERHILL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEVIN, DIANA E PRES
Address: 4930 N. PINE ISLAND RD
City-St-Zip: LAUDERHILL, FL 33351

Title: STD (X) Change () Addition
Name: LEVIN, ROBERT A SEC/TR
Address: 4930 N. PINE ISLAND RD
City-St-Zip: LAUDERHILL, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA E LEVIN

PRES

04/25/2002

Electronic Signature of Signing Officer or Director

Date