

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 09, 2006
Secretary of State

DOCUMENT# N00000001831

Entity Name: BROWARD ON BROADWAY, INC.**Current Principal Place of Business:**2708 NW 108 TERRACE
SUNRISE, FL 33322**New Principal Place of Business:****Current Mailing Address:**2708 NW 108 TERRACE
SUNRISE, FL 33322**New Mailing Address:****FEI Number:** 65-1023384**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEVINE, STEVEN T
2708 NW 108 TERRACE
SUNRISE, FL 33322 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** PD () Delete
Name: LEVINE, STEVEN T
Address: 2708 N.W. 108 TERRACE
City-St-Zip: SUNRISE, FL 33322 US**Title:** VD () Delete
Name: FREDEBAUGH, DANA
Address: 11000 S.W. 13 STREET
City-St-Zip: PEMBROKE PINES, FL 33025 US**Title:** SD () Delete
Name: LEVINE, MERYL
Address: 2708 NW 108 TERR
City-St-Zip: SUNRISE, FL 33322 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: LEVINE, STEVEN T PRES.
Address: 2708 N.W. 108 TERRACE
City-St-Zip: SUNRISE, FL 33322 US**Title:** VD (X) Change () Addition
Name: FREDEBAUGH, DANA VICE PR
Address: 11000 S.W. 13 STREET
City-St-Zip: PEMBROKE PINES, FL 33025 US**Title:** SD (X) Change () Addition
Name: LEVINE, MERYL SECRE
Address: 2708 NW 108 TERR
City-St-Zip: SUNRISE, FL 33322 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN T. LEVINE

PRES

07/09/2006

Electronic Signature of Signing Officer or Director_____
Date