

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01501

FILED  
Jan 05, 2005  
Secretary of State

Entity Name: SOUTH BROWARD WHEELERS, INC.

**Current Principal Place of Business:**

P O BOX 290723  
DAVIE, FL 333290723 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 290723  
DAVIE, FL 333290723 US

**New Mailing Address:**

FEI Number: 59-2386014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEISSER, MARK B  
10895 SANTA FE DRIVE  
HOLLYWOOD, FL 33026 US

**Name and Address of New Registered Agent:**

ESPINOSA, ELVI  
PO BOX 290723  
DAVIE, FL 333290723 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: ELVI ESPINOSA

01/05/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: STARR, NEIL  
Address: 8146 NOVA VILLAGE DR  
City-St-Zip: DAVIE, FL 33317

Title: TD ( ) Delete  
Name: MANDEL, ALAN  
Address: 2881 SW 85 WAY  
City-St-Zip: DAVIE, FL 33328

Title: PD ( ) Delete  
Name: SLOAN, CRAIG  
Address: 4115 NW 96 TERR  
City-St-Zip: SUNRISE, FL 33351

Title: DS ( ) Delete  
Name: LEVY, STEVE  
Address: 3771 RALEIGH ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: T (X) Delete  
Name: WEISSER, MARK  
Address: 10895 SANTA FE DRIVE  
City-St-Zip: HOLLYWOOD, FL 33026

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: ESPINOSA, MARCELINO  
Address: PO BOX 290723  
City-St-Zip: DAVIE, FL 333290723

Title: PRES (X) Change ( ) Addition  
Name: CARLSON, GRAF  
Address: PO BOX 290723  
City-St-Zip: DAVIE, FL 333297023

Title: MAL (X) Change ( ) Addition  
Name: SLOAN, CRAIG  
Address: 4115 NW 96 TERR  
City-St-Zip: SUNRISE, FL 33351

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELVI ESPINOSA

TRSR

01/05/2005

Electronic Signature of Signing Officer or Director

Date