## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N03000004859

TI FILED
Apr 06, 2005
Secretary of State

Entity Name: BNI OF PEMBROKE PINES FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O MILLEDGE & IDEN 3240 CORPORATE WAY MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

C/O MILLEDGE & IDEN 3240 CORPORATE WAY MIRAMAR, FL 33025

FEI Number: 14-1886821 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

IDEN, BRUCE 3240 CORPORATE WAY MIRAMAR, FL 33025 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:

Electronic Signature of Registered Agent Date

Name:

Address:

## o o

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

1000 CORPORATE DRIVE SUITE 700

(X) Change ( ) Addition

 Title:
 V
 ( ) Delete

 Name:
 SCHNEIDER, JEFFREY

 Address:
 14501 SW 24TH ST.

 City-St-Zip:
 MIRAMAR, FL 33027

**OFFICERS AND DIRECTORS:** 

Title: P ( ) Delete

Name: MARTIN, JOSE
Address: 1000 CORPORATE DRIVE, SUITE 700

City-St-Zip: FT LAUDERDALE, FL 33334

 Title:
 ST
 ( ) Delete

 Name:
 IGNACIO, DIANA

 Address:
 4410 WESTON ROAD

 City-St-Zip:
 WESTON, FL 333313193

City-St-Zip: FT. LAUDERDALE, FL 33334

Title: P (X) Change ( ) Addition

MARTIN, JOSE

Name: BARDSLEY, KIM A
Address: 14501 SW 29TH STREET
City-St-Zip: MIRAMAR, FL 33027

Title: ST (X) Change ( ) Addition

Name: SCHNEIDER, JEFF Address: 14501 SW 29TH STREET City-St-Zip: MIRAMAR, FL 33027

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: KIM BARDSLEY P 04/06/2005