

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 15, 2009
Secretary of State

DOCUMENT# N03000004859

Entity Name: BNI OF PEMBROKE PINES FLORIDA, INC.**Current Principal Place of Business:**C/O BRUCE F. IDEN P.A.
3240 CORPORATE WAY
MIRAMAR, FL 33025**New Principal Place of Business:****Current Mailing Address:**C/O BRUCE F. IDEN P.A.
3240 CORPORATE WAY
MIRAMAR, FL 33025**New Mailing Address:****FEI Number:** 14-1886821**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**IDEN, BRUCE
3240 CORPORATE WAY
MIRAMAR, FL 33025 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:** P () Delete
Name: BINGHAM, SHARYN M
Address: 10100 WEST SAMPLE ROAD, SUITE 401
City-St-Zip: CORAL SPRINGS, FL 33065**Title:** VP () Delete
Name: MAZAL, STEVEN
Address: 3050 CORPORATE WAY
City-St-Zip: MIRAMAR, FL 33025**Title:** ST () Delete
Name: MUSCARELLA, RONALD A
Address: 4462 NORTH UNIVERSITY DRIVE
City-St-Zip: LAUDERHILL, FL 33351**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: MARTIN, JOSE
Address: 5900 N. ANDREWS AVENUE, SUITE 800
City-St-Zip: FT. LAUDERDALE, FL 33309**Title:** VP (X) Change () Addition
Name: IDEN, BRUCE
Address: 3240 CORPORATE WAY
City-St-Zip: MIRAMAR, FL 33025**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE IDEN

VP

05/15/2009

Electronic Signature of Signing Officer or Director

Date