

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001201

FILED
Apr 30, 2008
Secretary of State

Entity Name: BROWARD LAKES BUSINESS CENTER CAMPUS ASSOCIATION, INC.

Current Principal Place of Business:

1003 SHOTGUN RD
SUNRISE, FL 33326

New Principal Place of Business:

Current Mailing Address:

1003 SHOTGUN RD
SUNRISE, FL 33326

New Mailing Address:

FEI Number: 20-0826298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESTREPO, FERNAN
1003 SHOTGUN RD
SUNRISE, FL 33326 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: D () Delete
Name: RESTREPO, FERNAN
Address: 1003 SHOTGUN RD
City-St-Zip: SUNRISE, FL 33326

Title: D () Delete
Name: REY, JAIME
Address: 7951 SW 40 ST STE 206
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: FERNAN RESTREPO

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date