

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51344

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** TRANSFLORIDA CENTRE, INC.

**Current Principal Place of Business:**

1489 W PALMETTO PK RD  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

160 CONGRESS PARK DRIVE  
SUITE 117  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

**FEI Number:** 65-0467594      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ROSENBERG, BRIAN CPA  
160 CONGRESS PARK DRIVE  
117  
DELRAY BEACH, FL 33445 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  
Name: BROXMEYER, BARBARA L  
Address: 10844 FRANKLIN HILLS AVENUE  
City-St-Zip: LAS VEGAS, NV 89135

Title: TD  
Name: BROXMEYER, MARVIN  
Address: 10844 FRANKLIN HILLS AVENUE  
City-St-Zip: LAS VEGAS, NV 89135

Title: VP  
Name: RUBIN, RONEN  
Address: 2634 NW 49TH STREET  
City-St-Zip: BOCA RATON, FL 33434

I hereby 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 all other like empowered.

SIGNATURE: BARBARA BROXMEYER

PD

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date