

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000000638

FILED
Apr 12, 2002 8:00 AM
Secretary of State

Entity Name: SPECIALTY AGENTS OF BROWARD COUNTY, INC.

Current Principal Place of Business:

2700 NW 62 ST D-132
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

1700 S OCEAN BLVD 3-C
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 65-0375562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, SHERRIE
1700 S OCEAN BLVD 3-C
POMPANO BEACH, FL 33062

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: SD () Delete
Name: SHERRIE WILLIAMS,
Address: 1700 S OCEAN BLVD 3-C
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: WILLIAMS, SHERRIE
Address: 1700 S OCEAN BLVD 3-C
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD () Delete
Name: POITEVIEN, REGGIE
Address: 2700 NW 62 STREET D132
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VPD () Delete
Name: WYSS, ROSS
Address: 2700 NW 62ST D132
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHERRIE WILLIAMS,
Address: 1700 S OCEAN BLVD 3-C
City-St-Zip: POMPANO BEACH, FL 33062

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

Title: VPD (X) Change () Addition
Name: CROWLEY, CHRISTINE
Address: 2700 W CYPRESS CREEK RD #D132
City-St-Zip: FT LAUDERDALE, FL 33309

Title: VPD (X) Change () Addition
Name: MUNGAL, KEITH
Address: 2700 WEST CYPRESS CREEK RD #D-132
City-St-Zip: FORT LAUDERDALE, FL 33309

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: SHERRIE WILLIAMS

PD

04/12/2002

Electronic Signature of Signing Officer or Director

Date