FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 FEB 18 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000001622

1. Corporation Name
Bring it to Broward, Inc.

Principal Place of Business
1512 E. Broward Blvd
#103
Fort Lauderdale, FL 33301

Mailing Address
SAME

3. Date Incorporated or Qualified: 04/06/1995
3a. Date of Last Report: 1996

2. Principal Place of Business	21 1512 E. Broward Blvd	2a. Mailing Address	26 1512 E. Broward Blvd
Suite, Apt. #, etc.	22 # 103	Suite, Apt. #, etc.	27 Ste 103
City & State	23 Fort Lauderdale	City & State	28 Fort Lauderdale FL
Zip	24 33301	Zip	29 33301
Country	25 USA	Country	30 USA

4. FEI Number: 65 0682062 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Coleman, Gayle
200 E. Las Olas Blvd
Ste 1900
Fort Lauderdale, FL 33301

10. Name and Address of New Registered Agent

81 Name: Debbie Mason
82 Street Address (P.O. Box Number is Not Acceptable): 1512 E. Broward Blvd Ste 103
83
84 City: Fort Lauderdale FL 85 Zip Code: 33301

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE [signature] Debbie Mason, Sec & D 2-9-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chairman & Director (C&D) ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Ben Wagman	1.2 NAME	
STREET ADDRESS	2000 W. Commercial Blvd # 101	1.3 STREET ADDRESS	
CITY-ST-ZIP	Fort Lauderdale FL 33309	1.4 CITY-ST-ZIP	
TITLE	Vice Chairman & Director (VC&D) ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	John Forysth	2.2 NAME	400002093339--1
STREET ADDRESS	915 Middle River Drive	2.3 STREET ADDRESS	-02/20/97--01079--001
CITY-ST-ZIP	Fort Lauderdale FL 33304	2.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	Secretary & Director (S&D) ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Debbie Mason	3.2 NAME	
STREET ADDRESS	1512 E. Broward Blvd # 103	3.3 STREET ADDRESS	
CITY-ST-ZIP	Fort Lauderdale FL 33301	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	2/18/97
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Debbie Mason 2-9-97 954/5223346
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #