

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2002 8:00 am
Secretary of State

02-17-2002 90018 001 ***150.00

DOCUMENT # P00000046991

1. Entity Name
PRIME OF BROWARD INC.

Principal Place of Business

5750 MARGATE BLVD.
SUITE 201
MARGATE FL 33063

Mailing Address

5750 MARGATE BLVD.
SUITE 201
MARGATE FL 33063

2. Principal Place of Business

378 NORTH LAKE BLVD

3. Mailing Address

378 NORTH LAKE BLVD

Suite, Apt. #, etc.

Suite #143

Suite, Apt. #, etc.

Suite #143

City & State

NORTH PALM BEACH, FL.

City & State

NORTH PALM BEACH, FL.

Zip

33408

Country

USA

Zip

33408

Country

USA

6. Name and Address of Current Registered Agent

HUNTLEY, LEE B
5750 MARGATE BLVD.
SUITE 201
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name

Steven G. Dunkle

Street Address (P.O. Box Number is Not Acceptable)

378 NORTH LAKE BLVD Suite #143

City

N. PALM BEACH

FL

Zip Code

33408

8. 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

Signature, typed or printed name of registered agent and title if applicable.

STEVEN G. DUNKLE, President

(NOTE: Registered Agent signature required when reinstating)

DATE

1/23/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HUNTLEY, LEE	
STREET ADDRESS	5750 MARGATE BLVD. SUITE 201	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	VPSD	<input checked="" type="checkbox"/> Delete
NAME	PEEPLES, TEEA	
STREET ADDRESS	5750 MARGATE BLVD. SUITE 201	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	PEEPLES, PAUL	
STREET ADDRESS	5750 MARGATE BLVD. SUITE 201	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DANIELE, STEVE	
STREET ADDRESS	5750 MARGATE BLVD 201	
CITY-ST-ZIP	MARGATE FL 33063	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEVEN GREGORY DUNKLE	
STREET ADDRESS	378 NORTH LAKE BLVD SUITE #143	
CITY-ST-ZIP	N. PALM BEACH, FL. 33408	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARTHUR H. DUNKLE	
STREET ADDRESS	378 NORTH LAKE BLVD #143	
CITY-ST-ZIP	N. PALM BEACH, FL. 33408	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUIS VALL	
STREET ADDRESS	378 NORTH LAKE BLVD #143	
CITY-ST-ZIP	N. PALM BEACH, FL. 33408	
TITLE	SECRETARY / TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TARALD HASSELL	
STREET ADDRESS	3304 LAKE MONT CT	
CITY-ST-ZIP	LAKE PARK, FL. 33403	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN G. DUNKLE

Date

1/23/2002

Daytime Phone #

954-818-6563

CR2E034 (9/01)