

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2003 8:00 am**  
**Secretary of State**

02-25-2003 90119 035 \*\*\*150.00

DOCUMENT # P00000051136

1. Entity Name

BROADBAND COMMUNICATIONS CORPORATION



Principal Place of Business

17220 N.W. SECOND COURT  
MIAMI FL 33169

Mailing Address

17220 N.W. SECOND COURT  
MIAMI FL 33169

2. Principal Place of Business

2424 N. Congress Ave

3. Mailing Address

2424 N. Congress Ave

Suite, Apt. #, etc.

Suite M

Suite, Apt. #, etc.

Suite M

City & State

West Palm Beach FL

City & State

West Palm Beh FL

Zip

33409

Country

USA

Zip

33409

Country

USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1010247

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ANDREWS, JOHN

1501 N.E. FOURTH AVENUE  
FORT LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name

Joe Rich

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

2424 N. Congress Ave

Suite M

City

West Palm Beach FL

Zip Code

33409

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Joe Rich

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/4/03

FILE NOW!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME RICH, JOE  
STREET ADDRESS 17220 N.W. SECOND COURT  
CITY-ST-ZIP MIAMI FL 33169

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME Joe Rich  
STREET ADDRESS 2424 N. Congress Ave, Suite M  
CITY-ST-ZIP West Palm Beach, FL 33409

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/03

561 478 1200

Date

Daytime Phone #

CR2E034 (10/02)