

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90226 010 ***150.00

DOCUMENT # P01000106886

1. Entity Name
FLORENCE BROMLEY INC.

Principal Place of Business

3000 N.E. 30TH PLACE
SUITE 308
FORT LAUDERDALE FL 33306

Mailing Address

3000 N.E. 30TH PLACE
SUITE 308
FORT LAUDERDALE FL 33306

B0025294



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1152199

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

-CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

Name FLORENCE BROMLEY

Street Address (P.O. Box Number is Not Acceptable)
3000 N.E. 30TH PL. SUITE 308

Fort Lauderdale, FL 33306

City

FL

Zip Code

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

Florence Bromley

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

(NOTE: Registered Agent signature required when reinstating)

Jan. 30/02

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME BROMLEY, FLORENCE PRES.
STREET ADDRESS 3000 N.E. 30TH PLACE, SUITE 308
CITY-ST-ZIP FORT LAUDERDALE FL 33306

☐ Delete

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☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Florence Bromley Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/02 954-561-4244

Date

Daytime Phone #

CR2E034 (9/01)