2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078665

FILED Jul 10, 2006 Secretary of State

Entity Name: PROGRESSIVE REAL ESTATE OF BROWARD, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 82 PEMBROK	23602 E PINES, FL	33082			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 823602 PEMBROKE PINES, FL 33082					
FEI Number:	02-0633319	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SOUFFRANT, GARY PO BOX 823602 PEMBROKE PINES, FL 33082 US					
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			t	Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO () SOUFFRANT, G PO BOX 82360 PEMBROKE PII	2	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCFO () SOUFFRANT, Y PO BOX 82360 PEMBROKE PII	2	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () SOUFFRANT, R PO BOX 82663 PEMBROKE PII	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () SOUFFRANT, G PO BOX 82360 PEMBROKE PII	2	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY SOUFFRANT PCEO 07/10/2006