

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000078665

FILED
Oct 17, 2007
Secretary of State

Entity Name: PROGRESSIVE REAL ESTATE OF BROWARD, INC.

Current Principal Place of Business:

PO BOX 823602
PEMBROKE PINES, FL 33082

New Principal Place of Business:

8060 NW 155ST
#100
MIAMI LAKES, FL 33016

Current Mailing Address:

PO BOX 823602
PEMBROKE PINES, FL 33082

New Mailing Address:

FEI Number: 02-0633319 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOUFFRANT, GARY
PO BOX 823602
PEMBROKE PINES, FL 33082 US

Name and Address of New Registered Agent:

SOUFFRANT, GARY
8060 NW 155ST
#100
MIAMI LAKES, FL 33016 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: GARY SOUFFRANT

10/17/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: SOUFFRANT, GARY
Address: PO BOX 823602
City-St-Zip: PEMBROKE PINES, FL 33082

Title: VCFO () Delete
Name: SOUFFRANT, YVONNE
Address: PO BOX 823602
City-St-Zip: PEMBROKE PINES, FL 33082

Title: S () Delete
Name: SOUFFRANT, REBECCA
Address: PO BOX 826631
City-St-Zip: PEMBROKE PINES, FL 33082

Title: T () Delete
Name: SOUFFRANT, GAMALIEL N
Address: PO BOX 823602
City-St-Zip: PEMBROKE PINES, FL 33082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: YVONNE SOUFFRANT

VCFO

10/17/2007

Electronic Signature of Signing Officer or Director

Date