

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000019877

FILED  
May 25, 2005  
Secretary of State

Entity Name: BROWARD COUNTY BAIL BONDS INC.

## Current Principal Place of Business:

1390 NW 16TH STREET  
MIAMI, FL 33125

## New Principal Place of Business:

15 S.W. 7TH STREET  
FORT LAUDERDALE, FL 33301

## Current Mailing Address:

1390 NW 16TH STREET  
MIAMI, FL 33125

## New Mailing Address:

15 S.W. 7TH STREET  
FORT LAUDERDALE, FL 33301

FEI Number: 65-1087717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE BAIL BOND FIRM LLC  
1390 NW 16TH STREET  
MIAMI, FL 33125 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_ 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: P ( ) Delete  
Name: ARENAS, RICHARD  
Address: 1390 NW 16TH STREET  
City-St-Zip: MIAMI, FL 33125

Title: T ( ) Delete  
Name: ALFONSO, YOSAVANI  
Address: 1390 NW 16TH STREET  
City-St-Zip: MIAMI, FL 33125

Title: S ( ) Delete  
Name: WALTERS, RUSS  
Address: 1390 NW 16TH STREET  
City-St-Zip: MIAMI, FL 33125

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: D ( ) Change (X) Addition  
Name: MILLMAN, SEAN  
Address: 15 S.W. 7TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SEAN MILLMAN

D

05/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date