

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000097242

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** SPACE PLUS OF BROWARD, INC.

**Current Principal Place of Business:**

888 SE 3RD AVE.  
SUITE 501  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

888 SE 3RD AVE.  
SUITE 501  
FT. LAUDERDALE, FL 33316 UN

**Current Mailing Address:**

P. O. BOX 292037  
DAVIE, FL 33329

**New Mailing Address:**

P. O. BOX 292037  
DAVIE, FL 33329 UN

**FEI Number:** 20-5391694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FORMAN, M. AUSTIN  
888 SE 3RD AVENUE  
SUITE 501  
FORT LAUDERDALE, FL 33316 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

**OFFICERS AND DIRECTORS:**

Title: MGR  
Name: FORMAN, M. AUSTIN  
Address: 888 SE 3RD AVE., SUITE 501  
City-St-Zip: FT. LAUDERDALE, FL 33316 UN

I hereby 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 all other like empowered.

SIGNATURE: M. AUSTIN FORMAN

MGR

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date