

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000144677		
1. Entity Name B.W. BROWARD CORP.		

FILED

07 MAR 13 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 18450 PINES BLVD PEMBROKE PINES, FL 33029	Mailing Address 18450 PINES BLVD PEMBROKE PINES, FL 33029
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

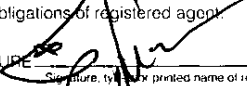
03082007 Chg-P CR2E034 (12/06)

4. FEI Number 20-5899530	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MONZON, YOEL E 2830 SW 137TH CT MIAMI, FL 33175	
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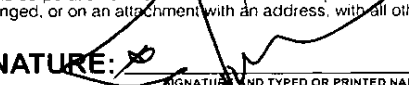
7. Name and Address of New Registered Agent Name EDGAR MIRANDA Street Address (P.O. Box Number is Not Acceptable) 15610 SW 54TH ST City MIAMI FL Zip Code 33185	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	300093713913 03/19/07--01020--005 **150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
P MIRANDA, EDGAR 15610 SW 54TH STREET MIAMI, FL 33185	
T MIRANDA, ALINA 15610 SW 54TH STREET MIAMI, FL 33185	☐ Delete
T MIRANDA, ALINA 15610 SW 54TH STREET MIAMI, FL 33185	☒ Delete
T MIRANDA, ALINA 15610 SW 54TH STREET MIAMI, FL 33185	☐ Delete
T MIRANDA, ALINA 15610 SW 54TH STREET MIAMI, FL 33185	☐ Delete
T MIRANDA, ALINA 15610 SW 54TH STREET MIAMI, FL 33185	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
VICE PRESIDENT FERNIN GALAN 1715 SW 87 Place MIAMI, FL 33165	☐ Change ☒ Addition
SECRETARY ILIANA GALAN 1715 SW 87 Place MIAMI, FL 33165	☐ Change ☒ Addition
K. Eckel	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	President 03/07/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #