## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # P07000023259

1. Entity Name



**FILED** 

Jan 11, 2008 8:00 am Secretary of State

01-11-2008 90034 012 \*\*\*150 00

1950 HOLDINGS OF BROWARD, INC. 4000-Principal Place of Business Mailing Address 2801 NW 55TH COURT 2801 NW 55TH COURT SUITE 5W **SUITE 5W** FT. LAUDERDALE, FL 33309 FT. LAUDERDALE, FL 33309 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072008 Chg-P CR2E034 (12/06) 4, FEI Number 65-1054309 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KAPLAN, RUSSELL D ESQ Street Address (P.O. Box Number is Not Acceptable) 750 SE 3RD AVENUE SUITE 100 FT. LAUDERDALE, FL 33316 Zip Code FI 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\_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE . 100 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P.S ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BOROWSKI, ROBERT NAME 2801 NW 55TH COURT, SUITE 5W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL 33309 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME BOROWSKI, ROBERT NAME 2801 NW 55TH COURT, SUITE 5W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

Robert Borowski 1-7-08

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

-485-5922