

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
17. Mar 03, 2008 8:00 am  
Secretary of State

01-29-2008 90030 035 \*\*\*150.00

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1. Entity Name  
IGH BROWARD PROPERTIES, INC.



Principal Place of Business Mailing Address  
301 W. 22ND ST. 301 W. 22ND ST.  
RIVIERA BEACH, FL 33404 US RIVIERA BEACH, FL 33404 US

66001922



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

01072008 Chg-P CR2E034 (12/08)

4. FEI Number

26-0505923

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

HERBERT, IRY D  
301 W. 22ND ST.  
RIVIERA BEACH, FL 33404

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE P.D. ☐ Delete  
NAME HERBERT, IRY D  
STREET ADDRESS 301 W. 22ND ST.  
CITY- ST- ZIP RIVIERA BEACH, FL 33404

TITLE S.T. ☐ Delete  
NAME HERBERT, GWENDOLYN Y  
STREET ADDRESS 301 W. 22ND STREET  
CITY- ST- ZIP RIVIERA BEACH, FL 33404

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
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NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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: Iry D Herbert  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-08

Date

561-541-2963

Daytime Phone #