## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000019340 (7)

SOUTHWEST BROWARD UTILITY CONSULTANTS, INC.

Principal Place 3109 STIRLIN SUITE 200 FT LAUDERD	G RD.	Mailing Address 3109 STIRLING RD. SUITE 200 FT LAUDERDALE FL 33	312		DO NOT WRITE IN THIS SP		
					03/15/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26	26		65-0404850	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	h		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country			ry	8. This corporation owes or has paid the curre		
24	25 29 30		30		Personal Property Tex due June 30. Yes No		
	9. Name and Address of Curr	ent Registered Agent		1 Name	10. Name and Address of New Registered A	jent	
	IGER, BERNARD A		١	1 saine			
4700 SHERIDAN ST.			8	2 Street Ad	eet Address (P.O. Box Number is Not Acceptable)		
SUITE B HOLLYWOOD FL 33021			Ë	3			
HOLLINGOD PL 33021				1			
			8	4 City	FI	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	iles, the abo	ve-named co	propration submits this statement for the purpose of c	hanging its registered	
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Horida, Such change was reations of Section 607 0505. F	authorized l lorida Statut	by the corpor es	ration's board of directors. I hereby accept the appoint	ntment as registered	
SIGNATURE		ight (who on, exhaust our nood) (	TOTAL CIOIS				
SIGNATURE	Signature, typed is printed name of registered a	agent and title it applicable (NC	IL Flegistered A	gent signature req	quired when reinstating) DATE	6	
12.		ND DIFFECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	DPST	☐ DELETE	1.1 TITLE	\ \ \	L	Change	
NAME	HOLLANDER, DAVID G	100	1.2 NAM			2	
STREET ADORESS	3109 STIRLING RD., STE. 2			ET ADDRESS		Įμ	
CITY-ST-ZIP	FT LAUDERDALE FL 33312 VS		1.4 CITY			Change	
TITLE	HOLLANDER, WALTER J	DELETE	2.1 TITLE				
NAME	3109 STIRLING RD STE 200	۸	2.2 NAM	1			
STREET ADDRESS	FT LAUDERDALE FL	,		ET ADDRESS			
CITY-ST-ZIP	TT LAUDENDALE TE	DELETE	2. 4 CITY 3.1 TITLE			Change Addition	
NAME		L. Dittil	3.2 NAM	1	_	J change El riboliton	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.5.51RC	Į.			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME		<del></del>	4. 2 NAM		_		
STREET ADDRESS				E1 ADDRESS			
CITY-ST-ZIP			4.4 City				
TITLE		☐ DELFYE	5.1 TiTLE			Change	
NAME			5.2 NAM				
STREET ADDRESS			5.3 STRE	ET ADDRESS			

14. Thereby certify that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ement report or supplemental annual 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 directed of the corporation of the received or truther empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 to chambor, for much plant probability an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6 1 TITLE 6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

2.27.98 904.962.9700

Change

Addition

**FILED** 

Mar 13 1998 8:00am

Secretary of State

CRZE034 (10/97)