FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

9[illegible] AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000040351 (6)**

1. Current Name

PRG OF BROWARD, INC.

Principal Place of Business

1217 N.E. 9TH AVE.
FORT LAUDERDALE FL 33334

Mailing Address

1217 N.E. 9TH AVE.
FORT LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/27/1994**

3a. Date of Last Report:

2. Florida Business Address
21

2a. Mailing Address
26

4. FEI Number: **65-050-3495**

Applied For ☐
Not Applicable ☐

Suite, Apt. #
22

Suite, Apt. #
27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip
24

County
25

Zip
29

County
30

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MCDONOUGH, PETER A
1217 NE 9TH AVE.
FT. LAUDERDALE FL 33334

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [illegible] Typed Registered Agent (if changed) DATE

12. OFFICERs AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 TITLE	DP	11 TITLE	☐ Change ☐ Addition
02 NAME	MCDONOUGH, PETER A	12 NAME	
03 STREET ADDRESS	1217 N.E. 9TH AVE.	13 STREET ADDRESS	
04 CITY ST ZIP	FORT LAUDERDALE FL 33334	14 CITY ST ZIP	
05 TITLE	S	21 TITLE	☐ Change ☐ Addition
06 NAME	MCDONOUGH, REBECCA L	22 NAME	
07 STREET ADDRESS	1217 N.E. 9TH AVE.	23 STREET ADDRESS	
08 CITY ST ZIP	FORT LAUDERDALE FL 33334	24 CITY ST ZIP	
09 TITLE		31 TITLE	☐ Change ☐ Addition
10 NAME		32 NAME	
11 STREET ADDRESS		33 STREET ADDRESS	
12 CITY ST ZIP		34 CITY ST ZIP	
13 TITLE		41 TITLE	☐ Change ☐ Addition
14 NAME		42 NAME	
15 STREET ADDRESS		43 STREET ADDRESS	
16 CITY ST ZIP		44 CITY ST ZIP	
17 TITLE		51 TITLE	☐ Change ☐ Addition
18 NAME		52 NAME	
19 STREET ADDRESS		53 STREET ADDRESS	
20 CITY ST ZIP		54 CITY ST ZIP	
25 TITLE		61 TITLE	☐ Change ☐ Addition
26 NAME		62 NAME	
27 STREET ADDRESS		63 STREET ADDRESS	
28 CITY ST ZIP		64 CITY ST ZIP	

14. I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the additional information relative to this annual report or supplemental annual report is true and correct 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 12 or Block 13 with an address with an asterisk.

SIGNATURE: [signature] 5/1/95 305-780-1234
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Telephone

PETER MCDONOUGH

0210973 CP