

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000044045

Entity Name: ALL BROWARD OPERATIONS, INC.

FILED
Sep 14, 2008
Secretary of State

Current Principal Place of Business:

321 STATE RD 84
FT LAUDERDALE, FL 33315

New Principal Place of Business:

312 WEST STATE RD 84
FT LAUDERDALE, FL 33315

Current Mailing Address:

321 STATE RD 84
FT LAUDERDALE, FL 33315

New Mailing Address:

312 WEST STATE RD 84
FT LAUDERDALE, FL 33315

FEI Number: 65-0499868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORCELLI, JOSEPH
321 STATE RD 84
FT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

PORCELLI, JOSEPH
312 WEST STATE RD 84
FT LAUDERDALE, FL 33315 US

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.

SIGNATURE: JOSEPH PORCELLI

09/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: PORCELLI, JOSEPH
Address: 321 STATE RD 84
City-St-Zip: FT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PORCELLI, JOSEPH
Address: 312 WEST STATE RD 84
City-St-Zip: FT LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH PORCELLI

PRES

09/14/2008

Electronic Signature of Signing Officer or Director

Date