## 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 # P94000065641 (0)

BROADWAY R & C, INC.

## **FILED** Apr 24 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	Mailing Address			T INDUCEDI MAI BULL STRUCTURE IL	ili <b>ab</b> ir <b>a b</b> ikai	I OIKO DIIII OIGI	Ø1 1101 1001
1726 E. 7TH AVE. TAMPA FL 33605		1726 E. 7TH AVE. Tampa Fl. 33605						22.05	
						DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS S	SPACE	
						09/07/1994			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		T <sub>Ar</sub>	plied For
21 26						59-3265388		- <del></del>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.					\$8.75	Additional
27						Certificate of Status Desired		Fee Re	gulred
I City & State I City & State						6. Election Campaign Financing	_	\$5.00	
23	7					Trust Fund Contribution		Added t	
Zip 24	Country	heren heren heren				8. This corporation owes or has pa	_		
[24]	25 g, Name and Address of Curren	29	30		<del></del>	Personal Property Tax due June  10. Name and Address of New Re			J No
וומ		t riogistorius rigurit		1 Na	ne	10. Hame are Radiose of flow the	giotoroar	1goill	
GUYTON, BARBARA B 1728 E. 7TH AVENUE									
SUITE 3700 BARNETT PLAZA				12 Stre	et Addre	ss (P.O. Box Number is Not Acceptab	)(e)(		
TAMPA FL 33805			1	3					
""			-	4				1221 200	<u> </u>
			`	City			FL	85 Zip (	Code
11. Pursuant to the provisions of Sections 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									s registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Buten & Just	<b>5</b>					4149	8	
12.	Signature, typed or printed numby of equity edinger OFFICERS AND			igent sign	ture required	d when reinstating)	DATE DEDOLAND	DIDECTOR	20.01.40
TITLE	D OF TOURS AND	DELETE	13. 1.1 Tift		Г	ADDITIONS/CHANGES TO OFFIC	JENS AND	Change	Addition
NAME	GUYTON, BARBARA B		1.2 NAM						
STREET ADDRESS	813 SEDDON COVE WAY		1.3 STREET ADDRESS		ss				
CITY-ST-ZIP	TAMPA FL			1.4 CITY-ST-ZIP					į'
TITLE			2.1 TiTL					Change	Addition
NAME	guyton, robert e		2.2 NAM	2.2 NAME					
STREET ADDRESS	813 SEDDON COVE WAY		2.3 STREET ADDRESS		ss				
CITY-S1-ZIP	TAMPA FL		2. 4 CITY-ST-ZIP						
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NAME			3.2 NAM	E	-				
STREET ADDRESS				3.3 STREET ADDRESS					
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STREET ADDRESS				ET ADDRE					
CITY-ST-ZIP				-ST-ZIP	~	••			
TITLE		DELETE	5.1 TITU		+-	<del></del>		Change	Addition
NAME			5.2 NAM					-	
STREET ADDRESS			5.3 STRE	ET ADDRE	is				
CITY-ST-ZIP			5.4 CITY	-ST-ZIP					
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rame			6.2 NAM	E					
STREET ADDRESS			63 STRE	ET ADDRE	is	•			
A170 CT 7(D			C A CITY		1				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 director of the corporation or the receivor 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 if changed, or on an attachment with an address.