

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073926

Entity Name: SOUTH BROWARD, INC.

FILED
Jul 02, 2004
Secretary of State

Current Principal Place of Business:

PO BOX 22-4057
HOLLYWOOD, FL 33022

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 22-4057
HOLLYWOOD, FL 33022

New Mailing Address:

FEI Number: 65-0559173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, ALLEN D
2011 SW 70 AVE. #812
DAVIE, FL 33317 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIEGEL, ALLEN
Address: 2011 SW 70 AVE. #812
City-St-Zip: DAVIE, FL 33317

Title: VP () Delete
Name: BEIN, LYLE
Address: 2011 SW 70 AVE. #812
City-St-Zip: DAVIE, FL 33317

Title: VP () Delete
Name: NEVINS, JOHN
Address: 2011 SW 70 AVE. #812
City-St-Zip: DAVIE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANCHEZ, TOM
Address: 2011 SW 70 AVE. #812
City-St-Zip: DAVIE, FL 33317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM SANCHEZ

P

07/02/2004

Electronic Signature of Signing Officer or Director

Date