FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Sporelany of State

1996

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9400084682** (1)

ERA BROKER COUNCIL OF BROWARD COUNTY, INC.

Principal Place of Business Mailing Address				i anditadi isa ililit Bidit Milit Milit	s envir naimi tarti Aigin Bitat Ibila (titt 1861
	COMMERCIAL BLVD. STE. 290 ERDALE FL 33309	3230 WEST COMMERC FORT LAUDERDALE FI			
A. Deineleal Di	45			3. Date Incorporated or Qualified 11/17/1994	3a. Date of Last Report 05/01/1995
2. Principal Place of Business 2a. Mailing Address 21				4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				65-0545337	Not Applicable
27		h	- , -, -, -, -, -, -, -, -, -, -, -, -, -,	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zιρ	Country	This corporation has liability for	Added to Fees
24	25	29	30		Intangible tax under s. 199,032,
	Name and Address of Curre	nt Registered Agent		10. Name and Address of New R	
STEIN, I 7701 NO DAVIE F	OVA DRIVE				PAU
DAVIC I	£ 33324		83 84 City		85 Zin Code
11. Pursuant to	O the provisions of Sections 607 occur	2 and 60 / 1500 50 11 6	1 1 1	ET. LANDERDALE	
or registere	ed agent, or both, in the State of Flori	z and 607.1508, Florida Statute: ida, Such change was authorize	s, the above named or d by the corporation's	orporation submits this statement for the pur board of directors. Thereby ancept the appo	pose of changing its registered office
rammar witi	n, and adjectine obligations of Sec	199 607.0505, Fiorida Statutes.	114.100	1181 1 001 5 5	whether as registered agent. Tairy
SIGNATURE	Signal was typing in printed name of registered a pro-	ta of this mail distances to the original di	E Residenced Agent some time :	MAN PRESIDENT	4/4/46
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 18
TITLE	D	⊠ DELE1E	1.1701(6	PRESIDENT	Change Addition
NAME	STEIN, DAVID		1.2 NAME	MICHELLE CAMPAU	
STREET ADDRESS	7703 NOVA DRIVE		1.3 STREET ADDRESS	2400 G. OAKLAND F	ARK BLVD
CITY-ST-ZIP	DAVIE FL 33324		1.4 CITY - \$1 - 7IP	FT. LAUDERDALE,	
TITLE	D	∑ DELETE	2 1 117LE		Change Addition
NAME	ACEVEDO, JESSE		2.2 NAME		
STREET ADDRESS	8100 W SUNRISE BLVD		2.3 STREET ADORESS		
CITY - ST - ZIP	PLANTATION FL 33322		2 4 CITY - \$1 - ZIP		
TITLE	D CANEELD CHADALAND	☐ DELETE	3 1 TIFLE	TREASURER	Change Addition
NAME	CANFIELD, CHARALANE 15872 STATE ROAD 84		3.2 NAME		
STREET ADDRESS	FT LAUDERDALE FL 33326		33 STREET ADDRESS		
CITY - ST - ZIP TITLE	I I CAUCERDALE PL 33320	Fine	3 4 CITY - ST - ZIP		
NAME		☐ DELETE	4 1 TITLE		Change Addition
STREET ADDRESS			4 2 NAME		
CITY - ST - ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY - ST - ZIP		
NAME			5 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME		
CITY-SI-ZIF			5 3 STREET ADDRESS		
TITLE		☐ DELETE	5 4 C(TY - S1 - 2)P 6 1 T(T) E		Channa C Addition
NAME			6 2 NAME		Change Addition
STREET ADDRESS			6 3 STHEET ADDRESS		
CITY-ST-ZiP			6 4 City-St-Zip		
14. I do hereby	certify that the information supplied v	vith this filing is voluntarily furnish	book and the second	lify for the exemption stated in Section 119.0	17/31/k) Florida Statutos I further
oath, that La	the information indicated on this annu am an officer or director of the corpo Block 12 or Block 13 if changed, or o	ration or the receiver or to the	enconvered to ever its	iffy for the exemption stated in Section 119.0 curate and that my signature shall have the s a this report as required by Chapter 607, Flor	newy, monda statutes, i turther ame legal effect as if made under rida Statutes; and that my name

SIGNATURE:

CHARLES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/96

(954) 384-7300 Daytine Phone #