FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9500060073 (0)

BROAD PROPERTIES, INC.

Principal Place of Business

Mailing Address

2001 N.W. 93RD AVENUE MIAMI FL 33172 2001 N.W. 93RD AVENUE

FILED May 14 1997 8:00am Secretary of State



MIAMI FL 9317	2	MIAMI FL 33172-2927				pue .			
						3. Date Incorporated or Qualified 08/03/1995		ate of Last 01/1996	Ř
21	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0747549			for Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
City & State	θ	City & State	· • · · · · · · · · · · · · · · · · · ·			Election Campaign Financing Trust Fund Contribution			May Be
Zip 24	Country 25	Ζφ 29	30 Cour	ntry			Yes [□ No	s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			·	10. Name and Address of New Re	gistered	Agent	
	Berman, Saul		-	B1	Name				
	1 N.W. 93RD AVENUE MI FL 33172		Ì	82	Street Add	ress (P.O. Box Number is Not Accepta	ole)		
4	WI 1 B 00 11 B		Ī	83					
٠.			- 1	84	City		FL	_ ` `	Code
SIGNATURE	Signature, typed or printed name of registered a	Jest and sile if applicable. (NO)				poration submills this statement for the tion's board of directors. I heroby acce red when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	DERS AND		
TITLE	P	☐ DELETE	1.1 TUR	LE				Change	☐ Addition
NAME	STIBERMAN, SAUL		1.2 NAM	ME					
STREET ADDRESS	2001 N.W. 93RD AVENUE		13 STR	EET /	ADDRESS				
City-St-ZiP	MIAMI FL 33172		1.4 CITY	1.4 CITY - S1 - ZIP					
TITLE	VP DELETE		217111	L E				Change	Additio
NAME	STIBERMAN, SERGIO		2.2 NAA	M!					
STREET ADDRESS	2001 N.W. 93RD AVENUE	2.3 \$		REET /	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CII		11 - ZIP				
TITLE	☐ DILETE		3.1 1011	F				Change	Additio
NAME			3.2 NAN	ME					
STREET ADDRESS			3 3 S 1 R	Eff,	ADDRESS				
CITY-ST-ZIP			3.4. CIT	Y-S	1 - ZrP				
TITLE		☐ DELFTE	4.1 1lfL	LE				Change	Additio
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	KEET J	ADDRESS				
CITY-ST-ZIP			4.4 C(I)	y - S1	1 - ZIP				
TITLE		DELETE	5.1 TITL	LF				Change	Additio
NAME			5.2 NAN	Μŧ					
STREET ADDRESS			5.3 STR	RELT A	ADDRESS				
CITY-ST-ZIP			5.4 CH1	Y - S1	1 - ZIP				
TITLE		DELETE	6 1 T TL					Change	Additio
NAME			6.2 NAN	ME					
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP		/							
		<i>1</i>	6.4 DH	Y. CI	1.712				

14. I do hereby 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 to supplemental annual report is true and accurate and that my signature shall have the same fall 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 if chapter or on an attachment with an address.

1-12-97 (30.

(305)597 7700