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PROFIT CORPORATION ANNUAL REPORT

1999

BROAD STREET MARKETING, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90069 007 ***150.00

DOCUMENT #	P96000020987
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Mailing Address Principal Place of Business 700 W HILLSBORO BLVD. 700 WEST HILLSBORO BLVD. **BLDG 3. STE 101** BLDG. 3. STE 101 DO NOT WRITE IN THIS SPACE DEERFIELD BCH FL 33441 DEERFIELD BEACH FL 33441 HS 3. Date incorporated or Qualifed 03/07/1996 2a. Mailing Address 4 FEI Number Applied For 2. Principal Place of Business 65-0648269 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Country Zip Country 8. This corporation owes the current year Intangible Yes **W**No 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SOUTH FLORIDA REGISTERED AGENTS, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 200 EAS LAS OLAS BLVD. **SUITE 1900** 83 FT. LAUDERDALE FL/3330H Zip Code 85 City 84 s 607 5502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of office or registered agent, or both, agent. I am familiar with, and acce SIGNATURE (NOTE: Registered Agent signature required d agent and title if applicable when reinstating) CR2E034 (11/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 ☐ Addition ☐ Change DELETE TITLE PD 1.1 TITLE PAIGE, GREGORY L 1.2 NAME NAME 700 WEST HILLSBORO BLVD. BLDG 3 S 101 1.3 STREET ADDRESS STREET ADDRESS DEERFIELD BCH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE Change 2.1 TITLE TITLE 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TIDE 3.2 NAME NAME

14. I hereby certify that the information supplied with this filling 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 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 is changed, or on an attachness with an address, with all other like empowered.

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

TITLE

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BJAUNE REQUIRED

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4/27/99 (454)418-8601

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