

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000022911

1. Entity Name

BROWARD METALS, INCORPORATED

R

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90005 011 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3454 NW 27 AVE
POMPANO BEACH FL 33069

Mailing Address

3454 NW 27 AVE
POMPANO BEACH FL 33069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0649994

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALLE, ROSE D
3454 NW 27TH AVE
POMPANO BCH FL 33069

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD VALLE, ROSE D 3454 NW 27TH AVE POMPANO BCH FL 33069	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

ROSE D VALLE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/00

954-284-4321
Daytime Phone #

P96000028911

A0069540

Broward Metals Inc.

3454 NW 27 Avenue
Pompano Beach, FL 33069-1067

July 19, 2000

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500


Dear Examiner:

We are enclosing our annual uniform business report, second notice, with payment for \$150.00.

We did not receive the first notice this year! Without receiving the report we did not realize we had an obligation. We apologize for the delay, and hope you will accept this report and payment as timely filed. It is our company policy to promptly file all required reports and returns.

If further information is needed, please contact me at 954-984-4321.

Respectfully,


Mitchell W. Bruckner

MWB/ms

Enclosure