

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0174595 AV

DOCUMENT # P96000022911

1. Entity Name
BROWARD METALS, INCORPORATED

04-01-2002 90671 038 ***150.00

Principal Place of Business
**4350 NW 19TH AVE., STE. E
POMPANO BEACH FL 33064**

Mailing Address
**4350 NW 19TH AVE., STE. E
POMPANO BEACH FL 33064**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0649994**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROONEY, CHERYL
3330 SOUTHWEST 13TH AVE.
FT. LAUDERDALE FL 33315**

Name

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

4350 NW 19th Ave Suite E

City

Pompano Bch

FL

Zip Code

33064

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

Cheryl Rooney
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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 ☐ Delete
NAME **PD**
STREET ADDRESS **ARRIETA, RUBEN.**
CITY-ST-ZIP **3330 SW 13TH AVE
POMPANO BCH FL 33069**

TITLE ☒ Change ☐ Addition
NAME **V/D**
STREET ADDRESS **Arrieta, Ruben**
CITY-ST-ZIP **4350 NW 19th Ave Suite E
Pompano Bch FL 33064**

TITLE ☐ Delete
NAME **SD**
STREET ADDRESS **ROONEY, CHERYL**
CITY-ST-ZIP **3330 SW 13TH AVE
POMPANO BCH FL 33069**

TITLE ☒ Change ☐ Addition
NAME **V/S/D/T**
STREET ADDRESS **Rooney, Cheryl**
CITY-ST-ZIP **4350 NW 19th Ave, Suite E
Broward Metals Pompano Bch 33064**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **ARRIETA, RUBEN**
CITY-ST-ZIP **3330 SW 13TH AVE
POMPANO BCH FL 33069**

TITLE ☐ Change ☒ Addition
NAME **P/D**
STREET ADDRESS **Cardona, Angel**
CITY-ST-ZIP **4350 NW 19th Ave, Suite E
Pompano Bch FL 33064**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Cheryl Rooney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/02

954 984 4321

Date

Daytime Phone #

CR2E034 (9/01)