

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 FEB -5 AM 8:29

DOCUMENT # P96000028865

1. Corporation Name

EAST BROAD GROUP, INC.

Principal Place of Business

Mailing Address

2112 NORTH 15TH STREET STE 101
TAMPA FL 33605

2112 NORTH 15TH STREET STE 101
TAMPA FL 33605

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

SPARR, MIKE
2112 NORTH 15TH STREET STE 101
TAMPA FL 33605

3. Date Incorporated or Qualified

03/27/1996

4. FEI Number

59-3373674

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

1

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax

1 Yes 1 No

10. Name and Address of New Registered Agent

81 Name

Thomas J. McMullen, Jr.

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

2112 North 15th Street, Suite 101

83

84 City

TAMPA

FL

85 Zip Code

33605

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Thomas J. McMullen, Jr.*

Thomas J. McMullen, Jr.

1-28-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PSTD
MCMULLEN, THOMAS J JR
2112 NORTH 15TH STREET STE 101
TAMPA FL 33605

1 DELETED

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 Change 1 Addition

7000002773417-0

-02/11/99--01085--023

****158.75 ****158.75

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

1 Change 1 Addition

14. 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 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 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Thomas J. McMullen, Jr., President* 1-28-99 (813)297-2828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)