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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000
THE BROWARD COMPANIES, INC. P97000059522 (7)

## **FILED** May 18 1998 8:00am Secretary of State



Discipal Phase of Pusings					[ (*######		
Principal Place of Business Mailing Address							
100 NE 3RD AVE, SUITE 850 100 NE 3RD AVE. SUITE FT LAUDERDALE FL 33301 FT LAUDERDALE FL 3330							
FI ENUDERDALE PL 33301		TT ENODERDAD	FI CAUDENDALE FE 33301			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 07/02/1997	
2. Principal P	lace of Business	2a. Mailing Addr	<b>e</b> ss			4. FEI Number Applied For	
21		26	26			65-0777825 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27	27			Fee Required	
City & State	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution L Added to Fees	
Zip	Country	Zip	₩	ountry	r	8. This corporation owes or has paid the current year intangible	
24	_ 25	29	30			Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cur	rent Registered Agent		81	1	10. Name and Address of New Registered Agent	
SHAHADY, THOMAS R					Name		
100 NE 3RD AVE, SUITE 850				82	Street	Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33301				<u>_</u>			
				83			
				84	City	85 Zip Code	
					' '	FL   5   5   5   5   5   5   5   5   5	
SIGNATURE	Signature, typod or poiled name of registers. OFFICERS	d agent and ter if applicable AND DIRECTORS	(NOIL Registe		eni signaturi	e required when reinstaling) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	□ DE		TITLE		Change Addition	
NAME	MASSEY, GEORGE		1.2	NAME			
STREET ADDRESS	100 NE 3RD AVE, SUITE (	350	1.3	STREET	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 3330			CITY-5			
TITLE		DE		TITLE	· - · · · · · · · · · · · · · · · · · ·	Change Addition	
NAME			2.2	NAME			
STREET ADDRESS			2.3	STREET	ADDRESS	<b>.</b>	
CITY-ST-ZIP				4 CITY-			
TITLE	-	☐ DE		TITLE		Change Addition	
NAME			3.2	NAME			
STREET ADDRESS			3.3	STREE	T ADDRESS		
CITY-ST-ZIP			3.4	. CITY -	ST-ZIP		
TITLE		☐ DE		TITLE		Change Addition	
NAME			4. 3	2 NAME			
STREET ADDRESS			4.3	STREE	I ADDRESS		
CITY-ST-ZIP			1	CITY-			
TITLE		☐ DE	ELETE 51	TITLE		☐ Change ☐ Addition	
NAME			5.2	NAME			
STREET ADDRESS			5.3	STREE	1 ADDRESS		
CITY-ST-ZIP				CITY-:			
TITLE		□ Di		TITLE		Change Addition	
NAME			6.2	NAME			
STREET ADDRESS					T ADDRESS		
1				GITY-			
CITY-ST-ZIP	certify that the information supplies	d with this filma does not				ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

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: Turner certify that the informatic 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 exposation or the receiver or trustee exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13. The god or on an attachment with an address.