## 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

## DOCUMENT # P97000105187

1. Corporation Name

BROADLINE PRODUCTS, INC.

## **FILED** Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90070 007 \*\*\*150.00



Nation Address					- I (BDICEBOL SIG LAND LABOU ABSUL ABUS ABUS INDIC	88101 01181 H	101 (8(1) (8Q) (8P)
Principal Place of Business Mailing Address							
1020 NEWPORT CENTER DR WEST DEERFIELD BEACH FL 33442		1020 NEWPORT CENTER DR WEST DEERFIELD BEACH FL 33442		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualifed	317701	<del></del>
					12/15/1997		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	26		65-0802234		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22		27			y, Johnson G. Cama Donor L.		Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28	Country		Trust Fund Contribution		d to Fees
Zip					8. This corporation owes the current year Int		
24	25	29 30			Personal Property Tax.	D\(\tes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
	POLL TOPERU C		81	Name			
WASCH, JOSEPH C			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	E LAS OLAS BLVD						
SUIT		83					
FT L	AUDERDALE FL 33301		84	City .		85 Zi	p Code
44	to the provisions of Continue 607 060	2 and 607 1509 Florida Statutes t	the above	- named corn	oration submits this statement for the purpose of		its registered
office or re	to the provisions of Sections 607.050. egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autho	nizea by	the corporation	on's board of directors. I hereby accept the appoint	intment as	registered
SIGNATURE							
	Signature, typed or printed name of registered agen		istered Ager	t signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECT	TORS IN 12
12.	<del></del>	D DIRECTORS  DELETE	1.1 TITLE		ADDITIONS/GUARGES TO OUT ICERS AL	Chang	
l i	D		1.2 NAME				
NAME	KERENSKY, GERALD	ст					
STREET ADDRESS	1020 NEWPORT CNTR DR WES	OI .		F ADDRESS			į
CiTY-ST-ZIP	DEERFIELD BEACH FL 33442	☐ DELETE	1.4 CITY-S	T-ZIP		☐ Chang	e Addition
TITLE	D BOULD BODEDT I	□ nerete	2.1 TTLE	ļ			, II, 100,11011
NAME	BISHOP, ROBERT J		2.2 NAME				:
STREET ADDRESS	1020 NEWPORT CNTR DR WE	SI	2.3 STREE				
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2.4 CITY-5	ST-ZIP	<u></u>	□ Che	a Addition
TITLE	D	☐ DELETE	3.1 TITLE		and the second	Chang	e
NAME	LOPEZ, DENNIS A		3.2 NAME				
STREET ADDRESS	1020 NEWPORT CNTR DR WE	ST	3.3 STREE	T ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		3.4. CITY- 5	T-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE			Chang	e Addition
NAME	SOUSA, RICHARD		4. 2 NAME				
STREET ADDRESS	1020 NEWPORT CENTER DR V	NEST :	4.3 STREE	T ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Chang	e Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADORESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE	<del>                                     </del>	☐ DELETE	6.1 TITLE			Chang	e Addition
. I		<del>-</del>		-		_	
			6.2 NAME	i			
NAME STREET ADDRESS				T ADDRESS			

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 addless, with all other like empowered.

SIGNATURE:

954-428-4444