

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P98000018186 ✓

1. Entity Name

BROADWAY HORIZONS INC.

FILED

Apr 19, 2000 8:00 am

Secretary of State

04-19-2000 90115 018 ***158.75

Principal Place of Business

Mailing Address

4064 NW 62 Lane
Coral Springs, Florida
33067

2. Principal Place of Business

3. Mailing Address

Broadway Horizons

Broadway Horizons Inc

Suite, Apt.

Suite, Apt. #, etc.

4064 NW 62 Lane

4064 NW 62 Lane

City & State

City & State

Coral Springs, Florida Coral Springs, Florida

Zip

Zip

Country

Country

33067

USA

33067

USA

4. FEI Number

611000

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

SHELLEY GOLDMAN
4064 NW 62 LANE
CORAL SPRINGS- FLA
33067

Name: Shelley Goldman

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

4064 NW 62 Lane

City

Coral Springs

FL

Zip Code

33067

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

Shelley Goldman

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

(NOTE: Registered Agent signature required when reinstating)

4/10/00

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, 2000 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: PRESIDENT
NAME: SHELLEY GOLDMAN
STREET ADDRESS: 4064 NW 62 LANE
CITY-ST-ZIP: CORAL SPRINGS, FLORIDA 33067

☐ Delete

TITLE: VICE PRESIDENT
NAME: SIDNEY GOLDMAN
STREET ADDRESS: 11338 MAPLE TREE CT
CITY-ST-ZIP: BOCA RATON - FLORIDA 33428

☒ Delete

TITLE: ~~SECRETARY~~
NAME: SHELLEY GOLDMAN
STREET ADDRESS: 4064 NW 62 LANE
CITY-ST-ZIP: CORAL SPRINGS, FLORIDA 33067

☐ Delete

TITLE: TREASURER
NAME: SIDNEY GOLDMAN
STREET ADDRESS: 11338 MAPLE TREE CT
CITY-ST-ZIP: BOCA RATON, FLA 33428

☒ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Delete

TITLE: ~~VICE PRESIDENT~~ VICE PRES
NAME: SHELLEY A GOLDMAN
STREET ADDRESS: 4064 NW 62 LANE
CITY-ST-ZIP: CORAL SPRINGS FL 33067

☒ Change ☐ Addition

TITLE: TREASURER
NAME: SHELLEY A GOLDMAN
STREET ADDRESS: 4064 NW 62 LANE
CITY-ST-ZIP: CORAL SPRINGS, FL 33067

☒ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ Addition

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CITY-ST-ZIP:

☐ Change ☐ Addition

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ Change ☐ 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:

Shelley Goldman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00 954-341-1397

Date

Daytime Phone #

CR2E034 (9/99)