2002 UNIFORM BUSINESS REPORT (UBR)

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

Mar 05, 2002 8:00 am DOCUMENT # P98000044530 Secretary of State 1. Entity Name BROWARD TRAFFIC PROGRAM, INC. 03-05-2002 90138 015 ***150.00 Principal Place of Business Mailing Address 2901 W. OAKLAND PARK BLVD., B10 2901 W. OAKLAND PARK BLVD., B10 OAKLAND PARK FL 33311 OAKLAND PARK FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0836950 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required: 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ESTIME, GILBERT Street Address (P.O. Box Number is Not Acceptable) 444 BRICKELL AVE., SUITE 51-221 MIAMI FL 33131 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition NAME LAWLER, MARGARITE NAME STREET ADDRESS 1425 NE 23 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33305 Delete ☐ Addition Change TITLE TITLE NAME PIERRE LOUIS, FREDO NAME STREET ADDRESS STREET ADDRESS 2012 NW 11 AVENUE CITY-ST-ZIP FT. LAUDERDALE FL 33311 CITY-ST-ZIP ☐ Addition TITLE-Delete TITLE Change NAME NAME LAMONT, D. GEORGE STREET ADDRESS STREET ADDRESS 7515 NW 44 STREET, #102 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME BRUGUERA, SONIA STREET ADDRESS STREET ADDRESS 2901 WEST OAKLAND PARK BLVD., #B10 CITY-ST-ZIP OAKLAND PARK FL 33311 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS 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

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