

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000044530

FILED
Mar 30, 2005
Secretary of State

Entity Name: BROWARD TRAFFIC PROGRAM, INC.

Current Principal Place of Business:

2901 W. OAKLAND PARK BLVD., B11
OAKLAND PARK, FL 33311

New Principal Place of Business:

Current Mailing Address:

2901 W. OAKLAND PARK BLVD., B11
OAKLAND PARK, FL 33311

New Mailing Address:

FEI Number: 65-0836950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTIME, INC.
444 BRICKELL AVE., SUITE 51-221
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRUGUERA, SONIA
Address: 1601 NE 51 ST
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: VP () Delete
Name: LAWLER, MARGARITE
Address: 1425 NE 23 ST
City-St-Zip: WILTON MANORS, FL 33305

Title: S () Delete
Name: PEIRRE-LOUIS, FREDO
Address: 3015 NW 73 AVE
City-St-Zip: SUNRISE, FL 33313

Title: T (X) Delete
Name: LAMONT, D GEORGE
Address: 2901 W OAKLAND PK BLVD B-11
City-St-Zip: OAKLAND PARK, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARITE LAWLER

VP

03/30/2005

Electronic Signature of Signing Officer or Director

Date