


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

03-14-2008 90039 010 \*\*\*150.00

**DOCUMENT # P04000051642**  
 1. Entity Name  
 500 S.W. 3RD AVENUE, INC.




Principal Place of Business: 500 S.W. 3RD AVENUE, FORT LAUDERDALE, FL 33315 US  
 Mailing Address: 600 SOUTH ANDREWS AVENUE, SUITE 500, FORT LAUDERDALE, FL 33301 US

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country

40045776



01292008 Chg-P CR2E034 (12/06)

4. FEI Number: 20-1407123 Applied For: Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:  
 KULIK, KEVIN J  
 600 SOUTH ANDREWS AVENUE  
 SUITE 500  
 FT. LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent  
 Name: KULIK, KEVIN J  
 Street Address (P.O. Box Number is Not Acceptable): 500 S.W. 3<sup>RD</sup> AVENUE  
 City: FT. LAUDERDALE FL Zip Code: 33315

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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE: *Kevin J. Kulik* DATE: 3/11/08

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: P,D NAME: KULIK, KEVIN J STREET ADDRESS: 500 S.W. 3RD AVENUE CITY-ST-ZIP: FORT LAUDERDALE, FL 33315	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP,D NAME: COLLINS, BRADLEY M STREET ADDRESS: 500 S.W. 3RD AVENUE CITY-ST-ZIP: FORT LAUDERDALE, FL 33315	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kevin J. Kulik* DATE: 3/11/08 DAYTIME PHONE #: 954 761-9411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR