


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT #</b> P00000002639	
<b>1. Entity Name</b> BOOMTOWN SPORTSWEAR INC.	

<b>Principal Place of Business</b> 668 S GULFVIEW BLVD. CLEARWATER BEACH, FL 33767-2642 US	<b>Mailing Address</b> 668 S GULFVIEW BLVD. CLEARWATER BEACH, FL 33767-2642 US
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**DO NOT WRITE IN THIS SPACE**



04182005 No Chg-P CR2E034 (10/03)

<b>4. FEI Number</b> 59-3619259	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

LUBOTSKY, DAVID A  
2494 BAYSHORE BLVD  
SUITE 102  
DUNEDIN, FL 33698

**DO NOT WRITE  
IN THIS SPACE**

**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: David A Lubotsky David A Lubotsky 4/18/05  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	SWISA, MEIR MISHEL
STREET ADDRESS	668 S GULFVIEW BLVD
CITY-ST-ZIP	CLEARWATER, FL 337672642
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000349511  
05/02/05-80068-011 150.00

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IN THIS SPACE**

**12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** MISHEL SWISA 4/20/05 (727) 647-2882  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #