

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 216743

FILED
Jan 07, 2004
Secretary of State

Entity Name: COSTA BROOM WORKS, INC.

Current Principal Place of Business:

3606 4TH AVE.
P O BOX 5091
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5091
P O BOX 5091
TAMPA, FL 336755091 US

New Mailing Address:

FEI Number: 59-0841671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA, FRANK J
3606 4TH AVENUE
TAMPA, FL 33605 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: DP () Delete
Name: COSTA, FRANK J
Address: 123 CHESAPEAKE AVE.
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: COSTA, MARY S
Address: 109 CHESAPEAKE AVE.
City-St-Zip: TAMPA, FL

Title: STD () Delete
Name: COSTA, CONSTANCE
Address: 109 CHEAPEAKE AVE.
City-St-Zip: TAMPA, FL

Title: DV () Delete
Name: COSTA, JOSEPH F.
Address: 308 W CHIPPEWA AVENUE
City-St-Zip: TAMPA, FL

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: FRANK J. COSTA

DP

01/07/2004

Electronic Signature of Signing Officer or Director

Date