

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000003449 (3)

1. Corporation Name  
BROADBENT SELECTIONS, INC.

Principal Place of Business  
22088 UNION ST  
STE #2  
SAN FRANCISCO CA 94123  
US

Mailing Address  
2359 UNION ST.  
SAN FRANCISCO CA 94123

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
07/08/1996

4. FEI Number  
94-3237787

Applied For  
Not Applicable

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

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

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
2a. Mailing Address  
25 Suite, Apt. #, etc.  
26 City & State  
27 Zip  
28 Country  
29

9. Name and Address of Current Registered Agent  
BUCHAN, RUSS  
1172 36TH AVE. NE  
ST. PETERSBURG FL 33704

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS         | CITY - ST - ZIP  | DELETE                   |
|-------|------|------------------------|------------------|--------------------------|
|       | CPST | BROADBENT, BARTHOLOMEW | 2088 UNION ST #2 | <input type="checkbox"/> |
|       |      |                        | SAN FRANCISCO CA |                          |
|       |      |                        |                  | <input type="checkbox"/> |
|       |      |                        |                  | <input type="checkbox"/> |
|       |      |                        |                  | <input type="checkbox"/> |
|       |      |                        |                  | <input type="checkbox"/> |
|       |      |                        |                  | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | Change                   | Addition                 |
|-----------|----------|--------------------|---------------------|--------------------------|--------------------------|
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |
|           |          |                    |                     | <input type="checkbox"/> | <input type="checkbox"/> |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Linda M. Heiler, LINDA M. HEILER 2/24/98 415931 1728

CP2E034 (10/97)