

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000250

Entity Name: BRO WRECKERS, INC.

FILED  
Jan 10, 2006  
Secretary of State

**Current Principal Place of Business:**

7962 OLD TRAMWAY DR.  
MELBOURNE, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

7777 N. WICKHAM RD. #12-511  
MELBOURNE, FL 32940

**New Mailing Address:**

FEI Number: 62-1481357

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OGREN, HANS  
7962 OLD TRAM WAY DRIVE  
MELBOURNE, FL 32940 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: PC ( ) Delete  
Name: OGREN, HANS  
Address: 7962 OLD TRAM WAY DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: S ( ) Delete  
Name: OGREN, ASE  
Address: 7962 OLD TRAM WAY DRIVE  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 Chapter 119, 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: HANS OGREN

PRES

01/10/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date