## ANNUAL REPORT

## **DOCUMENT # K75998**

1. Entity Name

**BRUCON CORPORATION** 



FILED Jan 09, 2008 08:00 Al Secretary of State

Principal Place of Business

6478 N.W. 63 WAY PARKLAND, FL 33067 Mailing Address

6478 N.W. 63 WAY PARKLAND, FL 33067



DO NOT WRITE IN THIS SPACE

01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0111683 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

LA GALA, CONNIE P 6478 N.W. 63 WAY PARKLAND, FL 33067

## 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 lamiliar with, and accept the obligations of registered agent.

(NOTE: Registered Agent signature required when reinstating)

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

9. Election Campaign Financing

Trust Fund Contribution.

\$5.00 May Be Added to Fees U00000776169 01/09/08-80014-002 150.00

DATE

TITLE P
NAME LA GALA, CONNIE
STREET ADDRESS
CITY-ST-ZIP PARKLAND, FL 33067

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

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

TITLE NAME

SIGNATURE

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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:

CON NIC LA GATA, Pres.

954-341-458

Daytime Phone #