

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000000104

Entity Name: BOOMCHIX, INC.

FILED
Apr 30, 2003
Secretary of State

Current Principal Place of Business:

1615 N 58TH AVE
HOLLYWOOD, FL 33021

Current Mailing Address:

1615 N 58TH AVE
HOLLYWOOD, FL 33021

New Principal Place of Business:

1509 SW FIRST STREET
#1
FT. LAUDERDALE, FL 33312

New Mailing Address:

1509 SW FIRST STREET
#1
FT. LAUDERDALE, FL 33312

FEI Number: 65-1077456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOURS, SUSAN A
1615 N 58TH AVE
HOLLYWOOD, FL 33021

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOURS, SUSAN A
Address: 1615 N 58TH AVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: POMPONIO, MICHAEL F
Address: 1615 N 58TH AVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD () Delete
Name: JOHNSON, LUCILLE M
Address: P O BOX 1182
City-St-Zip: HAYWARD, WI

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SOURS, SUSAN A
Address: 1615 N 58TH AVE
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: EDWARDS, KATHERINE
Address: 1509 SW FIRST STREET
City-St-Zip: FT. LAUDERDALE, FL 33312

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE EDWARDS

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04/30/2003

Electronic Signature of Signing Officer or Director

Date