


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000060340

1. Entity Name
BROADSOURCE TECHNOLOGIES CORPORATION



Principal Place of Business
**11266 W HILLSBOROUGH AVE #197
 TAMPA, FL 33635-9762**

Mailing Address
**11266 W HILLSBOROUGH AVE #197
 TAMPA, FL 33635-9762**

DO NOT WRITE IN THIS SPACE



04202004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3729464 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**COURTACCESS CENTERS OF AMERICA INC
 3249 W CYPRESS ST STE C
 TAMPA, FL 33607**

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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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000124523
 04/22/04-R0014R-1105 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD HARICH, PHILIP L 11266 W HILLSBOROUGH AVE #197 TAMPA, FL 336359762
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VD LAJEUNESSE, TENNYSON 11266 W HILLSBOROUGH AVE #197 TAMPA, FL 336359762
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12. 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 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: Philip Harich **Philip Harich** 4/20/04 813-477-8774
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #