

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

09-09-2003 90028 045 ***550.00
P02000050047

DOCUMENT # P02000050047

1. Entity Name
BROGLIO SERVICES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT -8 PM 4:08

Principal Place of Business
12063 BASIN STREET WEST
WELLINGTON FL 33414

Mailing Address
12063 BASIN STREET WEST
WELLINGTON FL 33414

2. Principal Place of Business
116 BELLEZZA TERRACE
Suite, Apt. #, etc.

3. Mailing Address
116 BELLEZZA TERRACE
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
ROYAL PALM BEACH FL.
Zip
33411
Country

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Zip
33411
Country

4. FEI Number
03-0440379
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

NICHOLS, WESLEY L ESQ
11380 PROSPERITY FARMS RD., SUITE 204
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

August 20, 2003
DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROGLIO, FRANK A 12063 BASIN STREET WEST WELLINGTON FL 33414	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Frank Broglia 116 Bellezza Terrace Royal Palm Beach FL 33411	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: FRANK BROGLIO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 20, 2003 561-723-9267
Date Daytime Phone #

CR2E034 (4/03)

10/2/03