2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000060161

1. Entity Name

BRYAN BROOMFIELD CONSTRUCTION INC.



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

625 EAST MCDONALD AVE EUSTIS, FL 32726 US Mailing Address

P.O. BOX 1081

EUSTIS, FL 32727 US



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04112007	110 Oligin	0142004 (117	0142004 (11700)				
4. FEI Number	•	1	Applied For				
20-0973	3664		Not Applicat				

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRYAN, BROOMFIELD K 625 E MCDONALD AVE EUSTIS, FL 32726

CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the p tions of registered agent.	urpose of changing its registered office	or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and site is	applicable. (NOTE: Registered Agent sig	gnature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May 8e Added to Fees	U00000746358 05/16/07-80055-014 150.00
10.	OFFICERS AND DIREC	TORS	**************************************	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROOMFIELD, BRYAN K 625 EAST MCDONALD AVE EUSTIS, FL 32726			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME				

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.

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SIGNATURE: Dun-	Lotonoon	whee to	/ Bryan	K. Day	mtick	400126	2007 5/6	-5486
SIGN/TURE /	UND TYPED OR PRINTED	NAME OF SIGHING OFFIC	ÉR OR DIRECTOR		Date	7	Daytime Phone #	