


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90086 026 \*\*\*150.00

<b>DOCUMENT # P04000171079</b> 1. Entity Name BROWARD HOSTING, INC.	
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Principal Place of Business <del>3000 SW 60 AVE</del> <b>2380 College Ave</b> DAVIE, FL <del>33314</del> <b>33317</b>	Mailing Address PO BOX 292037 DAVIE, FL 33329
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**DO NOT WRITE IN THIS SPACE**

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02042008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2039640	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  FORMAN, M. AUSTIN 888 SOUTHEAST THIRD AVE, SUITE 501 FORT LAUDERDALE, FL 33316
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**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 familiar with, and accept the obligations of registered agent.

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORMAN, M. AUSTIN 888 SOUTHEAST THIRD AVE, STE 501 FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TRUMBACH, ANDREW <del>3000 SW 60 AVENUE</del> <b>2380 college Ave</b> DAVIE, FL <del>33314</del> <b>33317</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 filing 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.

<b>SIGNATURE:</b> 	Date: <b>2-8-08</b>	Daytime Phone #
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