

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000146864

Entity Name: BROCON, INC.

FILED
Jul 07, 2006
Secretary of State

Current Principal Place of Business:

640-C MATTHEWS-MINT HILL RD
MATTHEWS, NC 28105

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3032
MATTHEWS, NC 28106

New Mailing Address:

FEI Number: 20-3726097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS SUPPORT INC.
417 STOWE AVE
SUITE 2
ORANGE PARK, FL 32073 US

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: DP () Delete
Name: MOORE, THEODORE P
Address: 1837 CHINCHESTER LANE
City-St-Zip: CHARLOTTE, NC 28270

Title: DV () Delete
Name: FIELDS, ROBERT L JR.
Address: 2805 PATTEN HILL DRIVE
City-St-Zip: MATTHEWS, NC 28105

Title: DST () Delete
Name: FIELDS, ROBERT L SR.
Address: 12811 LAWYERS RD
City-St-Zip: CHARLOTTE, NC 28227

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: MOORE, THEODORE P
Address: 1837 CHINCHESTER LANE
City-St-Zip: CHARLOTTE, NC 28270

Title: DP (X) Change () Addition
Name: FIELDS, PATRICIA A
Address: 12811 LAWYERS ROAD
City-St-Zip: CHARLOTTE, NC 28227

Title: DST (X) Change () Addition
Name: FIELDS, ROBERT L
Address: 12811 LAWYERS RD
City-St-Zip: CHARLOTTE, NC 28227

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA FIELDS

D

07/07/2006

Electronic Signature of Signing Officer or Director

Date