2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P08800 Jul 23, 2008 08:00 AM Secretary of State THE BROKEN NIBLICK, INC. Principal Place of Business Mailing Address 1850 BOY SCOUT DRIVE, SUITE 104 1850 BOY SCOUT DRIVE, SUITE 104 FT MYERS, FL 33907 FT MYERS, FL 33907 07172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2185699 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DUNN, KEN 1850 BOY SCOUT DR SUITE 104 IN THIS SPACE FORT MYERS, FL 33907 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. printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS 10. TITLE DUNN, KEN NAME 1850 BOY SCOUT DRIVE SUITE 104 STREET ADDRESS FT. MYERS, FL. CITY-ST-ZIP TITLE NAME 07/23/08-80001-011 550.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR