PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCL	<b>JME</b>	NT	#

P95000028923 (7)

1. Corporation	Name	• •			
BROOM	ISTICK, INC.				
Principai Place	of Business	Mailing Address			DIN DHAM KAN IDAN HAN KAN KAN
2001-20711-67 ST <del>≠PETEROON</del>		2001 - 20TH STREET NORTH ST. RETERSOUG FL 20202			
· · · · · · · · · · · · · · · · · · ·		. ,	·····	3. Date Incorporated or Qualified 04/12/1995	3a. Date of Last Report
2. Principal Place 21 404	ce of Business 774 ST. WORTH	2a. Mailing Address 26 P.O.Box	1443	4. FEI Number 59-33093	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.	1. 1		\$8.75 Additional
City & State		Ctu & State			Fee Hequired
23 SAFET	Y HARBOR, FI	28 SAFF77 1-	ARBOR F	<b>6.</b> Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zp ZH66	Country <b>25</b>	Zip	Country	8. This corporation has liability for inf	_ 3
24 346	9, Name and Address of Curren		30	Florida Statutes Yes  10. Name and Address of New Re-	V
			81 Name		2
	, kevin m		82 Street Ar	ddress (P.O. Box Number is Not Acceptable	)
	STREET NORTH				,
SAFETY	HARBOR FL 34695		83		•
			84 City		85 Zip Code
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above named corp	poration submits this statement for the purp	ose of changing its registered office
or registere	d agent, or both, in the State of Floric n, and accept the obligations of. Secti	1a. Such change was authorized	I by the corporation's b	oard of directors. I hereby accept the appoin	ritment as registered agent. I am
SIGNATURE.					
	Signature i types or pristed on religion of regioned agent.  OFFICERS AND		Paysher I Age of signature exp		DAIL
12.	OFFIGERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	COSAND DIRECTORS IN 12  COSAND Change Addition
NAME			1.2 NAME	KOUIN M. RARNETT	•
STREET ADDRESS			1.3 STREET ADDRESS	HOH MITST. NORTH	,
CITY-ST-ZIP			14 CHY-S1-2IP	SAPETY HARBON, PL	34695
TITLE		☐ DELETE	2 1 TITLE	TREASURE, SECRETA	R y 🖟 Change 🔲 Addition
NAME			2.2 NAME	FISH H RARNETT	
STREET ADDRESS			2 3 STREET ADDRESS	404 17TH ST WORTH	
CHTY-ST-ZIP			2.4 CITY - ST - ZIP	SAFETY HARROR, PI	91675
TIFLE		☐ DELETE	3 1 TITLE		Change Addition
NAME CAREET ADDOCS			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		☐ DELETE	3.4 CilY - \$1 - 2i⊬ 4. 1 TiTLE		Change Addition
NAME		<u> </u>	4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP	. And the second	
TITLE		DELETE	5 1 TITLE	<b>90000181</b> -05/13/96010	Addition
NAME			5.2 NAME	***200.00	49016
STREET ADDRESS			5.3 STREET ADDRESS	***CUU.UU	
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and the state of t		6 4 CITY - ST - ZIP		
14. Too hereby	certify that the information supplied v	vith this filing is voluntarily furnis	ned and does not qualit	fy for the exemption stated in Section 119.0	7(3)(k), Florida Statutes, Hurther

certify that the information indicated on this annual report or supplemental annual 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 bustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

E: Kovin M. Barnett Pro Kevin M. Barnett 4/15/46 726-6969
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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CR2E034 (12/95)