

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 13, 2004 8:00 am**  
**Secretary of State**

07-13-2004 90006 016 \*\*\*150.00

**DOCUMENT # P95000075566**

1. Entity Name  
**BORART HOLDINGS, INC.**



Principal Place of Business  
**907 S 21ST AVENUE  
HOLLYWOOD, FL 33020 US**

Mailing Address  
**907 S 21ST AVENUE  
HOLLYWOOD, FL 33020 US**



07072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3339664**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**ATTWOOD, BRIAN  
907 S 21ST AVENUE  
HOLLYWOOD, FL 33020**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME ATTWOOD, BRIAN  
STREET ADDRESS 2781 OCEAN CLUB BLVD #204  
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE VP  
NAME ROMILIO VENTURA  
STREET ADDRESS 17901 NE 9TH CT  
CITY-ST-ZIP N MIAMI BCH, FL 33162

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 exemption stated in Section 119.07(3)(i), 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:** *Brian Attwood*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*7-9-04 954-925-2318*

Date

Daytime Phone #