2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P96000078285

Entity Name: BEST OF BROWARD SPRINKLERS, INC.

Current Principal Place of Business:

7081 TAFT STREET
BOX 165
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

7081 TAFT STREET
BOX 165
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-0696239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANFORD, ROBERT
7081 TAFT STREET
BOX 165
HOLLYWOOD, FL 33024 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SANFORD, ROBERT
Address: 7081 TAFT STREET, BOX 165
City-St-Zip: HOLLYWOOD, FL 33024

Title: S ( ) Delete
Name: MANFREDI, THOMAS
Address: 6334 PIERCE ST
City-St-Zip: HOLLYWOOD, FL 33023

Title: T ( ) Delete
Name: KONDAS, LARRY
Address: 4920 ADAMS STREET
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: KONDAS, LARRY
Address: 4920 ADAMS STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: T (X) Change ( ) Addition
Name: NAPOLEON, ANTHONY
Address: 9501 W. HEATHER LANE
City-St-Zip: MIRAMAR, FL 33025

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SANFORD PD 04/29/2009

Electronic Signature of Signing Officer or Director — Date