

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000015050

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** BROSKOWITZ TECHNOLOGIES, INC.

**Current Principal Place of Business:**

5360 FAWN WOODS CT.  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

5224 WEST STATE ROAD 46  
#355  
SANFORD, FL 327719230 US

**New Mailing Address:**

5360 FAWN WOODS CT.  
SANFORD, FL 32771 US

**FEI Number:** 59-3494099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROSKOWITZ, BARRY S PRESIDE  
5360 FAWN WOODS COURT  
SANFORD, FL 32771 US

**Name and Address of New Registered Agent:**

BROSKOWITZ, BARRY S  
5360 FAWN WOODS COURT  
SANFORD, FL 32771 US

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: BARRY BROSKOWITZ

03/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: BROSKOWITZ, BARRY S  
Address: 5360 FAWN WOODS COURT  
City-St-Zip: SANFORD, FL 32771 US

Title: VP  
Name: BROSKOWITZ, CORA H  
Address: 5360 FAWN WOODS COURT  
City-St-Zip: SANFORD, FL 32771

I hereby 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 all other like empowered.

SIGNATURE: BARRY BROSKOWITZ

PRES

03/21/2012

Electronic Signature of Signing Officer or Director

Date