

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000022709

FILED
Mar 28, 2006
Secretary of State

Entity Name: BROM WEST CORP.

Current Principal Place of Business:

3800 PIEDMONT ST.
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3800 PIEDMONT ST.
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0839179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POPOVYCH, OLEG
3800 PIEDMONT ST.
HOLLYWOOD, FL 33021 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: D () Delete
Name: POPOVYCH, ROMAN
Address: 53 SHEVCHENKO STREET., AP #12
City-St-Zip: LVIV, UKRAINE 290039,

Title: D () Delete
Name: POPOVYCH, BOHDANA
Address: 53 SHEVCHENKO STREET., AP #12
City-St-Zip: LVIV, UKRAINE 290039,

Title: D () Delete
Name: POPOVYCH, OLEG
Address: 3800 PIEDMONT ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: POPOVYCH, MYKOLA
Address: 53 SHEVCHENKO ST APT #12
City-St-Zip: LVIV, UKRAINE 290039,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POPOVYCH, ROMAN
Address: 53 SHEVCHENKO STREET., AP #12
City-St-Zip: LVIV, UKRAINE, UA 79039 UA

Title: D (X) Change () Addition
Name: POPOVYCH, BOHDANA
Address: 53 SHEVCHENKO STREET., AP #12
City-St-Zip: LVIV, UKRAINE, UA 79039 UA

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

Title: D (X) Change () Addition
Name: POPOVYCH, MYKOLA
Address: 53 SHEVCHENKO ST APT #12
City-St-Zip: LVIV, UKRAINE, UA 79039 UA

I hereby certify that the information supplied with this filing does not qualify for the 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: POPOVYCH

D

03/28/2006

Electronic Signature of Signing Officer or Director

_____ Date