



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

08 AUG 19 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F05000006906			
1. Entity Name BCATCO A.R.L., INC.			
Principal Place of Business 2511 BEE RIDGE ROAD SARASOTA, FL 34239		Mailing Address 2511 BEE RIDGE ROAD SARASOTA, FL 34239	
2. Principal Place of Business - No P.O. Box # 2535 Bee Ridge Road Suite, Apt. #, etc.		3. Mailing Address 2535 Bee Ridge Road Suite, Apt. #, etc.	
City & State Sarasota, FL		City & State Sarasota, FL	
Zip 34239	Country	Zip 34239	Country
6. Name and Address of Current Registered Agent COLLIER, RONALD L 240 S. PINEAPPLE AVE., 10TH FL SARASOTA, FL 34236		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHN GILBERT KILLMISTER BERESFORD HOUSE, BELLOZANNE ROAD ST HELIER JERSEY CHANNEL ISL, JE23JW <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARY MICHAEL KILLMISTER BERESFORD HOUSE, BELLOZANNE ROAD ST HELIER JERSEY CHANNEL ISL, JE23JW <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MEGAN LEIGH TOAL BERESFORD HOUSE, BELLOZANNE ROAD ST HELIER JERSEY CHANNEL ISL, JE23JW <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT FISHMAN, JORDAN 2511 BEE RIDGE ROAD SARASOTA, FL 34239 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2535 Bee Ridge Road
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERESFORD SECRETARIES LIMITED BERESFORD HOUSE, BELLOZANNE ROAD ST HELIER JERSEY CHANNEL ISL, JE23JW <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		Jordan Fishman, President 8/13/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	



08132008 Chg-P CR2E034 (12/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

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

300134951603
08/26/08--01005--030 ***566,25

JC 8/20