## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000120321

Entity Name: B.C.P. ENTERPRISES, INC.

FILED Aug 31, 2005 Secretary of State

| Current Principal Place of Business:        |  |                                       | New Principal Place                         | New Principal Place of Business:             |  |
|---|--|---------------------------------------|---|--|--|
|   | 9 TERRACE<br>ON, FL 33324                              |                                       |   |  |  |
| Current Mailing Address:                    |  |                                       | New Mailing Address:                        |  |  |
|   | 9 TERRACE<br>ON, FL 33324                              |                                       |   |  |  |
| FEI Number:                                 | 80-0024849   | FEI Number Applied For()              | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and                                    | Address of C   | urrent Registered Agent:              | Name and Address o                          | f New Registered Agent:                      |  |
| 967 NW 79                                   | , CATHY M<br>9 TERR.<br>ON, FL 33324                   | US                                    |   |  |  |
|   | named entity s<br>e of Florida.                        | submits this statement for the        | ourpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUR                                    | RE:  |                                       |   |  |  |
|   | Electron   | ic Signature of Registered Ag         | ent   | Date   |  |
|   |  | 3(2)(b), F.S., the corporation did no | ot receive the prior notice.                |  |  |
| OFFICERS AND DIRECTORS:                     |  |                                       | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | D ()<br>VOSEKAS, CAT<br>967 NW 79 TER<br>PLANTATION, F | RRACE                                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CATHY VOSEKAS PRES 08/31/2005