


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2007 8:00 am**  
**Secretary of State**

02-07-2007 90048 001 \*\*\*150.00

DOCUMENT # P97000057298  
 1. Entity Name  
 BIZICK ENTERPRISES, INC.



40011050

Principal Place of Business	Mailing Address
<del>1300 CORPORATE CENTER DR. SUITE 105-B WELLINGTON, FL 33411</del> <b>3850 HOLLYWOOD BLVD. STE 204 HOLLYWOOD, FL 33021</b>	<del>1300 CORPORATE CENTER DR. SUITE 105-B WELLINGTON, FL 33411</del> <b>3850 HOLLYWOOD BLVD. STE 204 HOLLYWOOD, FL 33021</b>



01262007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0764328	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 BIZICK, RONALD G  
~~1300 CORPORATE CENTER DR. SUITE 105-B WELLINGTON, FL 33411~~  
**3850 HOLLYWOOD BLVD. SUITE 204 HOLLYWOOD, FL 33021**

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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 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BIZICK, RONALD G <del>1300 CORPORATE CENTER DR. WELLINGTON, FL 33411</del> <b>3850 HOLLYWOOD BLVD. STE 204 HOLLYWOOD, FL 33021</b>
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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:  **1-30-07** **336 859-2593**

SIGNATURE (TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #