FILED
Mar 10, 2005 08:0
Secretary of Sta

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000004555

1. Entity Name
BICE, INC.

Principal Place of Business	Mailing Address
25 S.E. 2ND AVENUE SUITE 1235 MIAMI, FL 33131	25 S.E. 2ND AVENUE SUITE 1235 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

03022005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0891148

Applied For / Not Applicable

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

5. Name and Address of Current Registered Agent

SANTOS, MAURO C
25 S.E. 2ND AVENUE
SUITE 1235
MIAMI, FL 33131

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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: ____________________

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BAPTISTELLA, JR., LUCAS C
STREET ADDRESS	729 NE 195TH ST.
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	V
NAME	BAPTISTELLA, FATIMA
STREET ADDRESS	729 NE 195TH ST.
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	T
NAME	BAPTISTELLA, DANIEL
STREET ADDRESS	729 NE 195TH ST.
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	S
NAME	BAPTISTELLA, GINA
STREET ADDRESS	729 NE 195TH ST.
CITY-ST-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/10/05-80019-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] March 7, 2005

Signature and Typed or Printed Name of Signing Officer or Director — Date — Daytime Phone #