2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 29, 2004 08:00 AM Secretary of State **DOCUMENT # 674349** 1. Entity Name BIPAM, INC. Principal Place of Business Mailing Address 750 S. KROME AVENUE 750 S. KROME AVENUE FLORIDA CITY, FL 33034 FLORIDA CITY, FL 33034 CR2E034 (10/03) 01212004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2179434 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHLEHUBER, SAMUEL M. DO NOT WRITE 35250 S.W. 177TH COURT, #69 FLORIDA CITY, FL 33034 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE SCHLEHUBER, SAMUEL NAME 2605 MUIRFIELD TERRACE STREET ADDRESS U00000021614 01/30/04-80012-007 150.00 CITY-ST-ZIP HOMESTEAD, FL 33035 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST- ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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 of 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 w

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