2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000002053

Entity Name: BRIDGECOM INTERNATIONAL, INC.

FILED Feb 19, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	CIRCLE, SUIT SCO, NY 1054		115 STEVENS AVENUE THIRD FLOOR VALHALLA, NY 10595		
Current Mailing Address:			New Mailing Address:		
116 RADIO CIRCLE, SUITE 300 MOUNT KISCO, NY 10549			115 STEVENS AVENUE THIRD FLOOR VALHALLA, NY 10595		
FEI Number: 13-4123985 FEI Number Applied For () FEI Number		nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE, FL 32301 US 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.					
SIGNATURE:					
Electronic Signature of Registered Agent Date					
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PDVS () E WEPRIN, MICHA 40 RANDOM FAR CHAPPAQUA, NY	RMS CIRCLE	Title: Name: Address: City-St-Zip:	() CI	nange()Addition
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	O () CI CROTTY, BRIAN 115 STEVENS AV VALHALLA, NY 10	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () CI CAREY, JOHN 115 STEVENS AV VALHALLA, NY 10	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () CI RINKER, COREY 115 STEVENS AV VALHALLA, NY 10	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () CI MICHAEL, EVAN 115 STEVENS AV VALHALLA, NY 10	

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: COREY RINKER O 02/19/2002