

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002053

FILED
Feb 17, 2005
Secretary of State

Entity Name: BRIDGECOM INTERNATIONAL, INC.

Current Principal Place of Business:

115 STEVENS AVENUE
THIRD FLOOR
VALHALLA, NY 10595

New Principal Place of Business:

Current Mailing Address:

115 STEVENS AVENUE
THIRD FLOOR
VALHALLA, NY 10595

New Mailing Address:

FEI Number: 13-4123985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: CROTTY, BRIAN
Address: 115 STEVENS AVENUE
City-St-Zip: VALHALLA, NY 10595

Title: O () Delete
Name: RINKER, COREY
Address: 115 STEVENS AVENUE
City-St-Zip: VALHALLA, NY 10595

Title: O () Delete
Name: HUNTER, CHARLES
Address: 115 STEVENS AVENUE
City-St-Zip: VALHALLA, NY 10595

Title: OD () Delete
Name: TUNNEY, STEVEN F
Address: 1100 WILSON BOULEVARD
City-St-Zip: ARLINGTON, VA 22209

Title: D () Delete
Name: MITCHELL, BRIAN J
Address: 1100 WILSON BOULEVARD
City-St-Zip: ARLINGTON, VA 22209

Title: D () Delete
Name: RUBENSTEIN, SAMUEL G
Address: 1100 WILSON BOULEVARD
City-St-Zip: ARLINGTON, VA 22209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVEN J. BOGDAN

MR.

02/17/2005

Electronic Signature of Signing Officer or Director

Date