## F03000000262

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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## TRANSMITTAL LETTER

| Division of Corporations   |
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| SUBJECT: BCR Capital Strategies, Inc   |
| DOCUMENT NUMBER: F0300000 262  |
|  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:  |
| Alfred Reeves  |
| (Name of person)   |
| BCR Capital Strategies, The  |
| (Name of firm/company)   |
| P.O. Box 2-18  (Address)   |
| · · · · · · · · · · · · · · · · · · ·  |
| Dania, FL 33004-0218   |
| (City/state and zip code)  |
| For further information concerning this matter, please call:   |
| Alfred Reeves at 954 258-5341  (Name of person) (Area code & daytime telephone number)   |
| (Name of person) (Area code & daytime telephone number)  |
| Enclosed is a \$35.00 check made payable to the Department of State.   |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399 |

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OF BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1503, Florida Statutes, this statement of   |
|---|
| change is submitted for a corporation organized under the laws of the State of De la wale in order  |
| to change its registered office or registered agent, or both, in the State of Florida.  |
| 1. The name of the corporation: BCR Capital Strategies. Inc   |
| 2. The principal office address: 1815 N. Surf Rd. #604  |
| Hollywood, FC 33019   |
| 3. The mailing address (if different): P.O. Box 218   |
| Dania FL 33004-0218   |
| 4. Date of incorporation/qualification: 1-19-2003 Document number: F03000000 262  |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  |
| Corporation Service Company En B TI   |
| 1201 Hays Street SE = F   |
| Tallahassee, FL 32301-2525 =  |
| Off *   |
| 6. The name and street address of the new registered agent (if changed) and or registered office (if changed):  |
| Alfred Reeves   |
| 1815 N. Surf Rd #604  |
| (P.O. Box or personal mailbox NOT acceptable)  Holly with F1 33019  |
| 170/14 wood, PC 33019   |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.  |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.   |
| Constant Treasurer Secretary Treasurer (Printed or true name and title)   |
|   |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| / lyn/ low 12/9/2003  |
| (Signature of Registered Agent) (Date)  |
| If signing on behalf of an entity:  |
|   |
| (Typed or Printed Name) (Canacity)  |

\* \* \* FILING FEE: \$35.00 \* \* \*