

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000006648

Entity Name: BTALCO LIMITED INC

FILED
Sep 26, 2006
Secretary of State

Current Principal Place of Business:

2091 SW 60 AVE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

2091 SW 60 AVE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 20-3619292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINGH, MICHAEL
2091 SW 60 AVE
PLANTATION, FL 33317 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SINGH, MICHAEL
Address: 2091 SW 60 AVE
City-St-Zip: PLANTATION, FL 33317

Title: VP () Delete
Name: ROSS, LYNETTE
Address: 2091 SW 60 AVE
City-St-Zip: PLANTATION, FL 33317

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: SINGH, ARLENE S
Address: 2091 SW 60TH AVE
City-St-Zip: PLANTATION, FL 33317

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHAEL SINGH

PD

09/26/2006

Electronic Signature of Signing Officer or Director

Date