2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 06, 2005 8:00 am Secretary of State

DOCUMENT # F9900003668 1. Entity Name BELL MICROPRODUCTS-FUTURE TECH, INC.									05-0	6-2005	90089	006 ***15	50.00
Principal Place of Business 7630 NW 25TH STREET MIAMI, FL 33122 US				Mailing Address 1941 RINGWOOD AVENUE SAN JOSE, CA 95131				- 1 188 11 88 18	P (8129 1821) P		11 6 5111 65153	i ililə əmiə əməl rə	11 0 t i si (3 3 1
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					05022005	Chg	- P	CR2E	034 (10/03)	
City & State			Cit	y & State			4. FEI Numb 65-093					oplied For ot Applicable	
Zip	Country		1			try		5. Certificate	of Status	Desired		\$8.75 Add Fee Require	
						Name		7. Name and	Address	of New R	egistered	Agent	
B&C CORPORATE SERVICES OF CENT 390 N. ORANGE AVENUE, SUITE 1100 ORLANDO, FL 32801				LORIDA	Street Addres	ss (P	O. Box Numb	er is Not A	cceptable				
					City					FL Zip Code			
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 acceptations of registered agent.													and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable.)							quired (when reinstating)			DATE		
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 7, 2005 9. Election Campaign Financing \$400 May Be Trust Fund Contribution. Added to Fees													
10.		OFFICERS AND	DIRECT	ORS	11.	,		ADDITIONS	CHANGE:	S TO OFF	ICERS AN	D DIRECTORS	S IN 11
TITLE NAME	CP Delete					E						Change	☐ Addition
STREET ADDRESS City-St-Zip						et adoress •St-Zip							
TITLE NAME	TS Delete 1					E .		·				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	1941 RING SAN JOS			ET ADDRESS •ST-ZIP									
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STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP							
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TITLE	HILFANI, I E	. 00122		☐ Delete	TITLE						-	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP						ET ADDRESS							
TITLE		-		☐ Delete	TITLE	-ST-ZIP		- <u> </u>	-		, <u></u>	☐ Change	Addition
NAME STREET ADDRESS						ET ADDRESS		4					ŀ
CITY-ST-ZIP	ertify that the	a information supplied will	n this filin	n does not qualify for		-ST-ZIP	- 500	tion 110 07/24	i) Florida i	Statuton I	further co	ertific that the '-	oformation .
12. I hereby certify that the information supplied with this filing 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 or trustee impowered 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 with an address, with all other time ampowered.													or director Block 11 if
SIGNAT		Vh	MZ	RH				05/	02/2	.005	(4	08) 451	-9400