2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004
Secretary of State

DOCUMENT# L67894

Entity Name: BICI ENTERPRISES, INC.

Current Principal Place of Business:

% JOSEPH L. SCHWARTZ
8812 SPRINGTREE LAKE DRIVE
SUNRISE, FL 33351

New Principal Place of Business:

8812 SPRINGTREE LAKE DRIVE
SUNRISE, FL 33351

Current Mailing Address:

% JOSEPH L. SCHWARTZ
8812 SPRINGTREE LAKE DRIVE
SUNRISE, FL 33351

New Mailing Address:

8812 SPRINGTREE LAKE DRIVE
SUNRISE, FL 33351

FEI Number: 65-0187619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCGLYNN, JAMES
9600 W SAMPLE ROAD
SUITE 507
CORAL SPRINGS, FL 33065

Name and Address of New Registered Agent:

MC GLYNN, JAMES
9600 W SAMPLE ROAD
SUITE 507
CORAL SPRINGS, FL 33065

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: JAMES MC GLYNN 05/03/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BICI, ROBERT,
Address: 8812 SPRING TREE LAKE DR
City-St-Zip: SUNRISE, FL

Title: DST ( ) Delete
Name: BICI, NILA,
Address: 8812 SPRING TREE LAKE DR
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT BICI DP 05/03/2004
Electronic Signature of Signing Officer or Director Date