2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085661

Entity Name: BCDIRECT CORP.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 694262 MIAMI, FL 33269 US **Current Mailing Address: New Mailing Address:** P.O. BOX 694262 MIAMI, FL 332694262 US FEI Number: 65-1039211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EVANS, JAMES C ESQ CATLIN SAXON EVANS FINK KOLSKI & ROMANEZ 1700 ALFRED I. DUPONT BUILDING 2600 DOUGLAS ROAD 169 E. FLAGLER STREET SUITE #1109 CORAL GABLES, FL 33134 US MIAMI, FL 33131 US 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: STEVE KOLSKI 04/26/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LACAL, LUIS A Name: Name: P.O. BOX 694262 Address: Address: City-St-Zip: MIAMI, FL 33269 US City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: LACAL, JUAN C Name: P.O. BOX 694262 Address: Address: MIAMI, FL 33269 US City-St-Zip: 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 Statutés. 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.

VΡ SIGNATURE: JUAN C. LACAL 04/26/2005