2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2005
Secretary of State

DOCUMENT# P00000086137

Entity Name: BELLCOM CORPORATION INC.

Current Principal Place of Business:

880 CORAL RIDGE
STE 104
CORAL SPRINGS, FL 33071

New Principal Place of Business:

11269 LAKEVIEW DR.
CORAL SPRINGS, FL 33071

Current Mailing Address:

880 CORAL RIDGE
STE 104
CORAL SPRINGS, FL 33071

New Mailing Address:

11269 LAKEVIEW DR.
CORAL SPRINGS, FL 33071

FEI Number: 65-1039073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BELLER, PATRICIA M
880 CORAL RIDGE DR
STE 104
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

BELLER, PATRICIA M
11269 LAKEVIEW DR.
CORAL SPRINGS, FL 33071 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: 03/02/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BELLER, FERNANDO J
Address: 880 CORAL RIDGE DR STE 104
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD ( ) Delete
Name: BELLER, PATRICIA M
Address: 880 CORAL RIDGE DR STE 104
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD ( ) Delete
Name: BELLER, PATRICIA M
Address: 880 CORAL RIDGE DR STE 104
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BELLER, PATRICIA M
Address: 11269 LAKEVIEW DR.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD (X) Change ( ) Addition
Name: BELLER, FERNANDO J
Address: 11269 LAKEVIEW DR.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD (X) Change ( ) Addition
Name: BELLER, PATRICIA M
Address: 11269 LAKEVIEW DR.
City-St-Zip: CORAL SPRINGS, FL 33071

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: PATRICIA M. BELLER PD 03/02/2005
Electronic Signature of Signing Officer or Director — Date