

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90025 015 ***150.00

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1. Entity Name

BC LEISURE ENTERPRISES, INC.



Principal Place of Business

**11000 PROSPERITY FARMS ROAD
SUITE 202
PALM BEACH GARDENS, FL 33410**

Mailing Address

**11000 PROSPERITY FARMS ROAD
SUITE 202
PALM BEACH GARDENS, FL 33410**

DO NOT WRITE IN THIS SPACE



02232004 No Chg-P CR2E034 (10/03)

4. FEI Number

22-3764854

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TANNENBAUM, MICHAEL D
2161 PALM BEACH LAKES BOULEVARD
SUITE 304
WEST PALM BEACH, FL 33409**

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IN THIS SPACE**

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 accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME PAPARONE, DONALD
STREET ADDRESS 11000 PROSPERITY FARMS RD STE 202
CITY-ST-ZIP PALM BCH GDN, FL 33410

TITLE ST
NAME PAPARONE, DOMENICK
STREET ADDRESS 11000 PROSPERITY FARMS RD STE 202
CITY-ST-ZIP PALM BCH GDN, FL 33410

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 empowered 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 like empowered.

SIGNATURE:

Domenick Paparone 02/23/04 561-622-3038