2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132153

Title:

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MATA, ANDYARA

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FT. LAUDERDALE, FL 333061957

3000 N.E. 30TH PLACE, 5TH FLOOR

Entity Name: BCT ENTERPRISES OF TAMPA, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3000 N.E. 30TH PLACE, 5TH FLOOR FT. LAUDERDALE, FL 333061957 **Current Mailing Address: New Mailing Address:** 3000 N.E. 30TH PLACE, 5TH FLOOR FT. LAUDERDALE, FL 333061957 FEI Number: 56-2322027 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: WILKERSON, WILLIAM 3000 NE 30TH PLACE 5TH FLOOR FORT LAUDERDALE, FL 33306 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: 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 WILKERSON, WILLIAM A Name: Name: 3000 N.E. 30TH PLACE, 5TH FLOOR Address: Address: City-St-Zip: FT. LAUDERDALE, FL 333061957 City-St-Zip: Title: PRES Title: () Delete () Change () Addition Name: POSK, JOSEPH P Name: 3000 N.E. 30TH PLACE, 5TH FLOOR Address: Address: FT. LAUDERDALE, FL 333061957 City-St-Zip: City-St-Zip: Title: Title: CS () Delete () Change () Addition MATA, ANDYARA Name: Name: 3000 N.E. 30TH PLACE, 5TH FLOOR Address: Address: FT. LAUDERDALE, FL 333061957 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ANDYARA MATA VP 01/08/2008

() Change () Addition