## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000011537

Entity Name: B I GOLDIN & ASSOCIATES INC

7602 PINERY WAY, APT C

TAMPA, FL 33615 US

Address: City-St-Zip: FILED Apr 14, 2005 Secretary of State

Littly Na	ille. B. I. GOL	DIN & ASSOCIATES, INC.			
Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
14819 OAI LUTZ, FL	K VINE DRIVE 33549 US				
Current Mailing Address:			New Mailing Address:		
14819 OAI LUTZ, FL	K VINE DRIVE 33549 US				
FEI Number	: 55-0817062	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
URIS, RAYMOND 7602 PINERY WAY APT C TAMPA, FL 33615 US			URIS, RAYMOND 1509 WOONSOCKET BRANDON, FL 33511	1509 WOONSOCKET LN.	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				04/14/2005	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( GOLDIN, BRUG 14819 OAK VII LUTZ, FL 335	IE DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CORRIGAN, TH 3635 LAKE JO		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	S/T ( URIS, RAYMOI	) Delete ND	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: BRUCE I. GOLDIN PRES 04/14/2005