

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90413 012 ***150.00

DOCUMENT # P03000048977

1. Entity Name
BCOM MANAGER GP, INC.



Principal Place of Business
**1201 BRICKELL AVE STE 1720
MIAMI, FL 33131**

Mailing Address
**1201 BRICKELL AVE STE 1720
MIAMI, FL 33131**

00000733

2. Principal Place of Business
1200 BRICKELL AVE

3. Mailing Address
1200 BRICKELL AVE

Suite, Apt. #, etc.
STE. 1720

Suite, Apt. #, etc.
STE. 1720

03182006 Chg-P CR2E034 (11/05)

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
68-0552174

Applied For
Not Applicable

Zip
33131

Zip
33131

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PALACHI, ASLAN
1201 BRICKELL AVE STE 1720
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name **PALACHI, ASLAN**

Street Address (P.O. Box Number is Not Acceptable)

1200 BRICKELL AVE, STE 1720

City **MIAMI**

FL

Zip Code **33131**

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

Aslan Palachi **ASLAN PALACHI**

04-01-06

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, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D PALACHI, ASLAN**
STREET ADDRESS **1200 BRICKELL AVENUE STE 1720**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE ☐ Delete
NAME **D BAUMANN, MICHAEL**
STREET ADDRESS **1200 BRICKELL AVENUE**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Aslan Palachi **ASLAN PALACHI**

04-01-06 305-375-0090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #