

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056561

FILED  
Jan 11, 2011  
Secretary of State

**Entity Name:** BCOT ASSESSMENT AND SERVICES, INC.

**Current Principal Place of Business:**

8956 N.W. 34TH STREET  
COOPER CITY, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

8956 N.W. 34TH STREET  
COOPER CITY, FL 33024 US

**New Mailing Address:**

**FEI Number:** 51-0464915      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CUSANO, LEONARD  
1860 N PINE ISLAND ROAD, STE 113  
PLANTATION, FL 33322 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** CAITS, BRIAN  
**Address:** 8956 N.W. 34TH STREET  
**City-St-Zip:** COOPER CITY, FL 33024 US

**Title:** DV  
**Name:** CAITS, CLARA  
**Address:** 8956 N.W. 34TH STREET  
**City-St-Zip:** COOPER CITY, FL 33024 US

**Title:** DST  
**Name:** CAITS, STEPHANIE  
**Address:** 8956 N.W. 34TH STREET  
**City-St-Zip:** COOPER CITY, FL 33024 US

I hereby 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 all other like empowered.

SIGNATURE: BRIAN CAITS

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

DP

01/11/2011

\_\_\_\_\_ Date