

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153419

Entity Name: BMS CAST TWO, INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

801 WEST BAY DRIVE
SUITE 800
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

801 WEST BAY DRIVE
SUITE 800
LARGO, FL 33770

New Mailing Address:

FEI Number: 20-4084581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WIGGINS, ROBERT E
801 WEST BAY DRIVE
SUITE 801
LARGO, FL 33770 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPEAU, LUC
Address: 801 WEST BAY DRIVE SUITE 800
City-St-Zip: LARGO, FL 33770

Title: STD () Delete
Name: BESTER, SHIRLEY
Address: 8228 WEST SUNSET BOULEVARD
City-St-Zip: WEST HOLLYWOOD, CA 90046

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: MARTINEZ, PHILIPPE F
Address: 801 WEST BAY DRIVE SUITE 800
City-St-Zip: LARGO, FL 33770

Title: ST (X) Change () Addition
Name: MARTINEZ, PHILIPPE F
Address: 801 WEST BAY DRIVE SUITE 800
City-St-Zip: LARGO, FL 33770

Title: P () Change (X) Addition
Name: CAMPEAU, LUC
Address: 801 WEST BAY DRIVE SUITE 800 SUITE #801
City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: PHILIPPE F. MARTINEZ

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04/20/2007

Electronic Signature of Signing Officer or Director

Date