2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000016903

Entity Name: BCL HOLDINGS, INC

FILED Jun 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1560 SAWGRASS CORPORATE PKWY 4TH FLOOR SUNRISE, FL 33323 **New Mailing Address: Current Mailing Address:** PO BOX 770338 CORAL SPRINGS, FL 33071 FEI Number: 54-2193625 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: FORM-A-CORP INC 100 VILLAGE SQUARE CROSSING STE 103 PALM BEACH GARDENS, FL 334104531 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BALZORA, JONATHAN Name: Name: 1512 N. KROEGER AVE Address: Address: City-St-Zip: FULLERTON, CA 92831 City-St-Zip: DT Title: Title: () Delete () Change () Addition BALZORA, LULRICK Name: Name: 10362 NW 16TH COURT Address: Address: CORAL SPRINGS, FL 33071 City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition CASTRO, GEORGE Name: Name: 972 CAROLINA STREET Address: Address: SAN FRANCISCO, CA 94107 City-St-Zip: City-St-Zip: Title: DV () Delete Title: () Change () Addition LAW, JOHN H Name: Name: Address: 3250 WANDERING WAY Address: City-St-Zip: LINCOLN, CA 95648 City-St-Zip: Title: Title: () Delete () Change () Addition BALZORA, NATALIE H Name: Name: 1512 N KROEGER AVE Address: Address: City-St-Zip: FULLERTON, CA 92831 City-St-Zip: Title: () Delete Title: () Change () Addition BALZORA, YOUDELINE Name: Name: 10362 NW 16TH COURT Address: Address: City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33071

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.

SIGNATURE: LULRICK BALZORA DT 06/17/2009