2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000069188

Entity Name: BCK ENTERPRISES, INC.

FILED Apr 21, 2008 Secretary of State

7904 EVINRUDE AVE. 7904 EVINRUDE AVE. NORTH PORT, FL 34286 NORTH PORT, FL 34291

Current Mailing Address: New Mailing Address:

7904 EVINRUDE AVE.

NORTH PORT, FL 34286

7904 EVINRUDE AVE.

NORTH PORT, FL 34291

FEI Number: 26-0352493 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:

MARTIN, JAMES R
7904 EVINRUDE AVE.
NORTH PORT, FL 34286 US

MARTIN, JAMES R
7904 EVINRUDE AVE.
NORTH PORT, FL 34291 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: 04/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MARTIN, JAMES R Name: MARTIN, JAMES R

 Address:
 7904 EVINRUDE AVE.
 Address:
 7904 EVINRUDE AVE.

 City-St-Zip:
 NORTH PORT, FL 34286
 City-St-Zip:
 NORTH PORT, FL 34291

Title: T () Delete Title: T (X) Change () Addition

 Name:
 MARTIN, LILLIAN P
 Name:
 MARTIN, LILLIAN P

 Address:
 7904 EVINRUDE AVE.
 Address:
 7904 EVINRUDE AVE.

 City-St-Zip:
 NORTH PORT, FL 34286
 City-St-Zip:
 NORTH PORT, FL 34291

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MARTIN, BRETT A
 Name:
 MARTIN, BRETT A

 Address:
 2740 SIESTA DR.
 Address:
 7904 EVINRUDE AVE

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 NORTH PORT, FL 34291

Title: S () Delete Title: S (X) Change () Addition

 Name:
 MARTIN, CRÂIG J
 Name:
 MARTIN, CRÂIG J

 Address:
 7904 EVINRUDE AVE.
 Address:
 7904 EVINRUDE AVE.

 City-St-Zip:
 NORTH PORT, FL 34286
 City-St-Zip:
 NORTH PORT, FL 34291

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: JAMES R MARTIN P 04/21/2008