

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000018425

Entity Name: BCI ENTERPRISES CORP

**FILED**  
**Mar 28, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

1815 THORNHILL ROAD  
SUITE 307-T  
AUBURNDALE, FL 33823

## **New Principal Place of Business:**

1815 THORNHILL ROAD  
SUITE 307-T  
AUBURNDALE, FL 33823 UN

## **Current Mailing Address:**

1815 THORNHILL ROAD  
SUITE 307-T  
AUBURNDALE, FL 33823

## **New Mailing Address:**

FEI Number: 26-4341796      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BANKS, TARA E  
127 QUAILWOOD DRIVE  
WINTER HAVEN, FL 33880 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: TARA E BANKS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: BANKS, RONNIE D  
Address: 127 QUAILWOOD DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD  
Name: BANKS, TARA E  
Address: 127 QUAILWOOD DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880

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: TARA E BANKS

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

SD

03/28/2013

\_\_\_\_\_  
Date