FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

attachment with an address, wit

SIGNATURE:

DOCUMENT # P96000079698 FILED 1. Entity Name BCOM DEVELOPMENT CORP. 02 MAY 28 PM 1:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 1201 Brickell Avenue 1201 Brickell Avenue Suite Apt #. etc. Suite 650 Suite Apt. #, etc.
Suite 650 DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For <u>Mia</u>mi, FL 65-0749287 Miami, FL Not Applicable Zip 33131 Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent BAUMANN, MICHAEL DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 1201 Brickell Avenue IN THIS SPACE Suite 650 Miami Zig 3131 FL 8. 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, 800005620928 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61[25] Make Check Payable to Department of State 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Added to Fees 11. OFFICERS AND DIRECTORS DPTS TITLE NAME NAME BAUMANN, MICHAEL STREET ADDRESS 1201 Brickell Ave., Ste.650 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 🕏 <u> Miami, FL 33131</u> TITLE NAME STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET AUDRESS 13. I hereby certify that the information supplied with refis filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information strue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director powered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 11 or on an indicated on this report or supplemental report of the corporation or the receiver or trustal of

Michael Baumann, Pres. 5-24-02

ED NAME OF SIGNING OFFICER OR DIRECTOR

pye for

page 2 St



ACCOUNT NO. : 072100000032

REFERENCE : 597548

4309914

AUTHORIZATION

COST LIMIT :

ORDER DATE: May 28, 2002

ORDER TIME : 10:06 AM

ORDER NO. : 597548-005

CUSTOMER NO: 4309914

CUSTOMER: Judy Rodman, Legal Assistant

Fowler White Burnett Hurley International Place, 17th Fl 100 Southeast 2nd Street

Miami, FL 33131-1101

ANNUAL REPORT FILING

NAME: BCOM DEVELOPMENT CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#1156

EXAMINER'S INITIALS: