


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2006 8:00 am
Secretary of State

06-09-2006 90002 004 ***150.00

DOCUMENT # P97000022069 1. Entity Name B.C.T.C., INC.			
Principal Place of Business 5216 NW 18TH CT J4 LAUDERHILL, FL 33313		Mailing Address PO BOX 5845 FT LAUDERDALE, FL 33310	
2. Principal Place of Business 5216 N.W. 18th ct.		3. Mailing Address 	
Suite, Apt. #, etc. J4		Suite, Apt. #, etc. 	
City & State LAUDERHILL, Florida		City & State 	
Zip 33313		Country Broward	
4. FEI Number 65-0734941		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BROWN, JULIAN A 5216 NW 18TH CT -J4 LAUDERHILL, FL 33313		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>J.A. Brown</i> <i>J.A. Brown</i> 6.02.06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, JULIAN A 5216 NW 18TH CT -J4 LAUDERHILL, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>J.A. Brown sr.</i> <i>J.A. Brown sr.</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 6.02.06 Daytime Phone # 754 422 1171	



ATTACHMENT
50021247
Division of Corporations

Annual Report[Annual Report Help](#)~~Document Number~~**P97000022069**~~Business-Entity Name~~**B.C.T.C., INC.**

FEI Number 650734941
FEI Number Status ☒ Listed Above ☐ Applied For ☐ Not Applicable
Certificate of Status Desired ☐ Yes ☒ No \$8.75 each
Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Principal Place of Business

Address 5216 NW 18TH CT
Suite, Apt. #, etc. J4
City, State LAUDERHILL, FL
Zip Code & Country 33313

Mailing Address

Address PO BOX 5845
Suite, Apt. #, etc.
City, State FT LAUDERDALE, FL
Zip Code & Country 33310

Name and Address of Registered Agent

Name (Last, First, Middle, Title) BROWN, JULIAN, A

- OR -

Business to serve as RA

Address (PO Box is not acceptable) 5216 NW 18TH CT -J4
Suite, Apt. #, etc.
City, State LAUDERHILL, FL
Zip Code & Country 33313 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title

D ☐

Name (Last, First, Middle, Title)

BROWN

JULIAN

A

- OR -Entity Name to serve as
Officer/Director

Street Address

5216 NW 18TH CT -J4

City, State

LAUDERHILL

FL

Zip Code & Country

33313

Title

Name (Last, First, Middle, Title)

- OR -Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Division of Corporations

ATTACHMENT

50021247 Page 3 of 4
#997000022069

Name (Last, First, Middle, Title)

D
Brown, Julian A, D

- OR -

Entity Name to serve as
Officer/Director

B.C.T.C., Inc.

Street Address

5216, N.W. 18th - J4

City, State

Lauderhill, Florida

Zip Code & Country

33313 US

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Resident
J.A. Brown, Sr.

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue

Reset