2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: 🎜

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Apr 04, 2001 8:00 am Secretary of State DOCUMENT # P97000029441 BCS INC. OF USA 04-04-2001 90055 011 ***150.00 Principal Place of Business Mailing Address 5241 CANNON WAY 1711 BELVEDERE ROAD WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33406 2. Principal Place of Business 3. Mailing Address 1711 BELVEDERE ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0739731 WEST PALM BEACH Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RAHMAN REZMUR RAHMAN, REZAUR Street Address (P.O. Box Number is Not Acceptable) **5241 CANNON WAY** WEST PALM BEACH FL 33415 Zip Code 33467 8. The above named entity submits, his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE A Signature, typed or printed Jame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete :R2E034 (10/00) Addition TITLE T★ Change TITLE REZAUR RAHMON RAHMAN, REZUAR NAME NAME 9225 OLMSTEAD DR. STREET ADDRESS STREET ADDRESS 5241 CANNON WAY CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 LAKE WORTH. FC-33467 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME CHOWDHURY, MAKSUDUL NAME STREET ADDRESS STREET ADDRESS 5241 CANNON WAY CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 TITLE ☐ Delete Addition NAME CHOWDHURY, B.A. NAME STREET ADDRESS STREET ADDRESS 5241 CANNON WAY CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.