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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000035743

1. Corporation Name

BCW COMMUNICATIONS, INC.



Principal Place of Business	Mailing Address
600 S ANDREWS AVE FORT LAUDERDALE FL 33301	600 S ANDREWS AVE FORT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		04/20/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEL Number	
22		27		65-0856910	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Country		5. Certificate of Status Desired	
24		25		29	
29		30		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132		81 Name J. DAVID BOGENSCHUTZ			
		82 Street Address (P.O. Box Number Not Acceptable) 600 S ANDREWS AVE, #500			
		83			
		84 City FT. LAUDERDALE			
		85 Zip Code FL 33301			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE		DATE			
3/25/99		3/25/99			

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Change Addition
NAME	BOGENSCHUTZ, J. DAVID	1.2 NAME	
STREET ADDRESS	600 S ANDREWS AVE, STE 500	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	Change Addition
NAME	CHALICK, ROBERT	2.2 NAME	
STREET ADDRESS	600 S ANDREWS AVE, STE 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	Change Addition
NAME	WILL, FRANK	3.2 NAME	
STREET ADDRESS	600 S ANDREWS AVE, STE 500	3.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>J. David Bogenschutz</i>		Date: 2/12/99	Daytime Phone #: (954) 764-2500
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