

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90023 034 ***150.00

DOCUMENT # P98000052823

1. Corporation Name
BCU JEANS CORP.



Principal Place of Business Mailing Address
2881 N OAKLAND FORREST DRIVE, UNIT 212 2881 N OAKLAND FORREST DRIVE, UNIT 212
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 2881 N. OAKLAND FOREST		26		06/12/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 Suite #212		27		650-178-4750	
City & State		City & State		Applied For	
23 OAKLAND PARK, FL 33309		28		Not Applicable	
Zip		Country		5. Certificate of Status Desired	
24 33309		30		[] \$8.75 Additional Fee Required	
25		29		6. Election Campaign Financing	
				Trust Fund Contribution [] \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. [] Yes [] No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ULCENA, BERWICK 2881 N OAKLAND FORREST DRIVE, UNIT 212 FT LAUDERDALE FL 33309		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

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 *[Signature]* DATE 04/21/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ULCENA, BERWICK [] DELETE	1.1 TITLE	[] Change [] Addition
NAME	2881 N OAKLAND FORREST DRIVE, UNIT 212	1.2 NAME	
STREET ADDRESS	FT LAUDERDALE FL 33309	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	[] Change [] Addition
TITLE	VP [] DELETE	2.1 TITLE	[] Change [] Addition
NAME	CHRISTIAN ULCENA	2.2 NAME	
STREET ADDRESS	same as above	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	[] Change [] Addition
TITLE	[] DELETE	3.1 TITLE	[] Change [] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	[] Change [] Addition
TITLE	[] DELETE	4.1 TITLE	[] Change [] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	[] Change [] Addition
TITLE	[] DELETE	5.1 TITLE	[] Change [] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	[] Change [] Addition
TITLE	[] DELETE	6.1 TITLE	[] Change [] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	[] Change [] Addition

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: *[Signature]* DATE 04-23-99 (94) 676-5813
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

0266873

CR2E034 (11/98)