## 2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

DOCUMENT # P98000107600 BIC'S ENGINE SALES & SERVICE, INC.

Principal Place of Business

Mailing Address

4401 EAST 10 AVENUE HIALEAH, FL 33010

983 WINDWARD WAY WESTON, FL 33327

## **FILED** Apr 08, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

02042008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0898278

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BICKRAM, RAMNARINE 983 WINDWARD WAY WESTON, FL 33327

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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					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000886508 04/18/08-20060-010-150-00
10.	OFFICERS AND DIREC	CTORS			<del>- U47 107 U6~9UU6U~U1U-15U. UU</del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMNARINE. BICKRAM 983 WINDWARD WAY WESTON, FL 33327				
IIILE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CHY-S1-ZIP			DO NOT WRITE		
NAME SIREET ADDRESS CHY-SI-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS GIFY+ST-ZIP					
TITLE NAME STREET ADDRESS CITY-S1-ZII'					
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.					

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR