FROM : F. GUTTA, CPA PHONE NO. : 954 452 8359

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2000 8:00 am
Secretary of State
04-28-2000 90072 044 ***150.00

DOCUMENT # P99000078941

1. Entity Name: BPT CONSULTING, INC.

Principal Place of Business / Mailing Address: 1216 E ATLANTIC BLVD., Suite 7, Pompano Beach, Florida 33060

2. Principal Place of Business	3. Mailing Address
1216 E ATLANTIC BLVD.	1216 E. ATLANTIC BLVD
Suite, Apt. #, etc.: 7	Suite, Apt. #, etc.: 7
City & State: Pompano Bch, FL	City & State: Pompano Bch, FL
Zip: 33060 Country: US	Zip: 33060 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0948131 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent:
WILLIAM Watson TRICK, JR
1216 E. ATLANTIC BLVD., Suite 7
Pompano Beach, FL 33060

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.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOWOP FEE IS $150.00
After MAY 1, 2000 Fee will be $450.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete
President, DIRECTOR secretary, TREASURER WILLIAM WATSON TRICK, JR 1216 E. ATLANTIC BLVD, STE 7 Pompano Bch, FL 33060	☐
	☐
	☐
	☐
	☐
	☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐

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 trustee 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.

SIGNATURE: _____ 4/20/00 954-942-9774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2EC78 (9/99)