

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000085576

Entity Name: BCD GROUP, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

5223 W BROWARD BLVD
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

8820 SW 131 ST
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0955870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANCK, BARBARA J
7631 SW 53 CT
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLANCK, CYNTHIA S
Address: 6400 SW 123 TERR
City-St-Zip: PINECREST, FL 33156

Title: V () Delete
Name: BLANCK, BARBARA J
Address: 7631 SW 53 CT
City-St-Zip: MIAMI, FL 33143

Title: ST () Delete
Name: ROTOLANTE, DEBRA B
Address: 6200 SW 132 ST
City-St-Zip: PINECREST, FL 33156

Title: D () Delete
Name: ARBOGAST, CATHRYN
Address: 851 CITRUS PLACE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: ROTOLANTE, DEBRA B
Address: 8550 SW 162 ST
City-St-Zip: PALMETTO BAY, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA B. ROTOLANTE

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04/14/2005

Electronic Signature of Signing Officer or Director

Date