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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V17760** **(2)**

1. Corporation Name
BCI HOLDING CORPORATION

Principal Place of Business
100 SE 2ND STREET
28TH FLOOR
MIAMI FL 33131
US

Mailing Address
100 SE 2ND STREET
28TH FLOOR
MIAMI FL 33131-2100
US

3. Date Incorporated or Qualified: 02/28/1992
3a. Date of Last Report: 03/06/1996

2. Principal Place of Business
21 3595 NW 110 Street
Suite, Apt. #, etc.
22 ste 300
City & State
23 MIAMI, FLORIDA
Zip / Country
24 33167 / 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip / Country
29 / 30

4. FEI Number: 65-0317683 ☐ Applied For ☐ Not Applicable

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

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

This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
KTG&S REGISTERED AGENT CORPORATION
100 SE 2ND STREET
28 FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent
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 and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE (Must be typed, printed or manually signed) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BIGIO, GILBERT 1031 IVES DAIRY RD., #230 MIAMI FL 33179 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 3595 NW 110 Street, Ste 300 Miami, FL 33167
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVS BEYDA, CLEMENT 1031 IVES DAIRY ROAD, #230 MIAMI FL 33179 ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☒ Change ☐ Addition 3595 NW 110 Street, Ste 300 Miami, FL 33167
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVTA VAUPEN, HY. 1031 IVES DAIRY RD., #230 MAIMI FL 33179 ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition 3595 NW 110 Street, Ste 300 Miami, Florida 33167
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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.

SIGNATURE: HY VAUPEN, VP + TREASURER 1/31/97 305 687-3416
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #