



2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 517496 1. Entity Name BLACKSTONE LEGAL SUPPLIES, INC.	
--	---

Principal Place of Business 3732 N.W. 16TH STREET FORT LAUDERDALE, FL 33311-4132	Mailing Address 3732 N.W. 16TH STREET FORT LAUDERDALE, FL 33311-4132
--	--

DO NOT WRITE IN THIS SPACE

FILED
 06 APR 28 PM 12: 59
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



04252006	No Chg-P	CR2E034 (11/05)
4. FEI Number 59-1708556	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HEYMAN, LESLIE 3732 N.W. 16TH ST. FT. LAUDERDALE, FL 33311	DO NOT WRITE IN THIS SPACE
---	-------------------------------

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable


FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	HEYMAN, LESLIE
STREET ADDRESS	3732 N.W. 16TH ST.
CITY - ST - ZIP	FT. LAUDERDALE, FL 33311
TITLE	SD
NAME	HEYMAN, BONNIE
STREET ADDRESS	3732 N.W. 16TH ST.
CITY - ST - ZIP	FT. LAUDERDALE, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

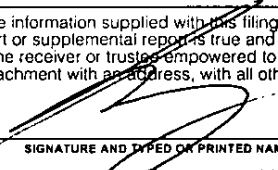
600074508716

05/12/06--01012--001 **150.00

DO NOT WRITE
IN THIS SPACE



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 reports 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.

SIGNATURE:  **Leslie Heyman** **President** **4/27/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #