

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 06, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT #J17836

1. Entity Name  
 BDL SEVEN, INC.



Principal Place of Business  
 JOHN BIELEJESKI, JR  
 SUITE 101  
 FORT LAUDERDALE, FL 33308

Mailing Address  
 4367 NORTH FEDERAL HIGHWAY  
 SUITE 101  
 FORT LAUDERDALE, FL 33308



01042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 59-2685795

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

BIELEJESKI, JOHN JR.  
 4141 N.E. 28TH AVENUE  
 FORT LAUDERDALE, FL 33308

**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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	BIELEJESKI, JOHN JR.
STREET ADDRESS	4141 N.E. 28TH AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	S
NAME	COSTAS, GEORGETTE R.
STREET ADDRESS	16674 HEMINGWAY DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33326
TITLE	VP
NAME	RANDOLPH, JAMES
STREET ADDRESS	980 NORTH FEDERAL HWY, SUITE 312
CITY-ST-ZIP	BOCA RATON, FL
TITLE	T
NAME	BIELEJESKI, ELVA
STREET ADDRESS	4141 NE 28TH AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 01/09/06-80020-014 150.00

**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 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.

SIGNATURE: \_\_\_\_\_

*John Bielejeski, Jr.*  
 JOHN BIELEJESKI, JR. - 4-06

Date

Daytime Phone #

954-772-8222