

DOCUMENT # P02000079135

1. Entity Name

BLORAR INTERNATIONAL CORP.



Secretary of State

01-21-2003 90129 024 ***150.00

Principal Place of Business Mailing Address
 1030 SW 87 AVE A7 1030 SW 87 AVE A7
 MIAMI FL 33174 MIAMI FL 33174



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 2821 SW CV AVE 2821 SW CV AVE
 City & State City & State
 MIAMI, FL 33155 MIAMI, FL 33155
 Zip Country Zip Country
 33155 33155

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 47-0881112 Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
 ARCE, JOSE E
 9020 SW 56 TERR
 MIAMI FL 33173
 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. 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, 2003 Fee will be \$550.00
 Make Check Payable to Florida Department of State
 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ARCE, JOSE E 9020 SW 56 TERR MIAMI FL 33173 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANCO, JUAN 2821 SW 65 AVE MIAMI FL 33155 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORDONEZ, JUAN M 1030 SW 87 AVE A7 MIAMI FL 33174 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE: *Jose E Arce* 1-17-03
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

BLORAR INTERNATIONAL CORP 08/2002
 1030 SW 87TH AVENUE A-7
 MIAMI, FL 33174-3264

1011

63-60/660

PAY TO THE ORDER OF FLORIDA DEPARTMENT OF STATE \$150.00
 One hundred fifty - 00/100 DOLLARS

THIS CHECK IS DELIVERED IN CONNECTION WITH THE FOLLOWING ACCOUNT(S)
 Doc # P02000079135 (UCR) 2003

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Jose E Arce
 SIGNATURE