2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 18, 2009
Secretary of State

DOCUMENT# P08000081477

Entity Name: BLOCKHEADS SERVICES INC

Current Principal Place of Business:

3539 DICKENS DR
HOLIDAY, FL 34691 US

New Principal Place of Business:

7109 BRAMBLEWOOD DR.
PORT RICHEY, FL 34668 US

Current Mailing Address:

3539 DICKENS DR
HOLIDAY, FL 34691 US

New Mailing Address:

P.O. 214
PORT RICHEY, FL 34668 US

FEI Number: 26-3323976 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLMES, GARY
3539 DICKENS DR
HOLIDAY, FL 34691 US

Name and Address of New Registered Agent:

HOLMES, GARY
7109 BRAMBLEWOOD DR
PORT RICHEY, FL 34668 US

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: 09/18/2009
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: HOLMES, GARY
Address: 3539 DICKENS DR
City-St-Zip: HOLIDAY, FL 34691 US

Title: VPT ( ) Delete
Name: CIMMINO, ANDREW
Address: 3539 DICKENS DR
City-St-Zip: HOLIDAY, FL 34691 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: SARMIENTO, JEREMY
Address: 6430 GRACE DR
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VPT ( ) Change (X) Addition
Name: BEGGS, ELEANOR
Address: 7109 BRAMBLEWOOD DR
City-St-Zip: PORT RICHEY, FL 34668 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ELEANOR BEGGS VPT 09/18/2009
Electronic Signature of Signing Officer or Director — Date