

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000082669

FILED
Mar 20, 2006
Secretary of State

Entity Name: B.L.S. & C., INC.

Current Principal Place of Business:

927 E. NEW HAVEN AVENUE
SUITE 311
MELBOURNE, FL 32901 US

New Principal Place of Business:

597 ASBURY AVE. N. E.
PALM BAY, FL 32907 US

Current Mailing Address:

597 ASBURY AVE., N.E.
PALM BAY, FL 32907

New Mailing Address:

FEI Number: 59-3278216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANCILIA, JOHN R ESQ
1800 WEST HIBISCUS BLVD
SUITE 138
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: PUTZ, RICHARD A
Address: 597 ASBURY AVE., N.E.
City-St-Zip: PALM BAY, FL

Title: DST () Delete
Name: PUTZ, CELESTINE M
Address: 597 ASBURY AVE., N.E.
City-St-Zip: PALM BAY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CELESTINE M. PUTZ

DST

03/20/2006

Electronic Signature of Signing Officer or Director

_____ Date