FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
04 JAN 13 PM 5:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000090397

1. Entity Name
BLAKE + COMPANY, C.P.A.'S, P.A.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 02-03-04

2. Principal Place of Business	3. Mailing Address
3550 BUSCHWOOD PARK DR.	3550 BUSCHWOOD PARK DR.
Suite, Apt. #, etc.: STE. 250	Suite, Apt. #, etc.: STE. 250
City & State: TAMPA, FL	City & State: TAMPA, FL
Zip: 33618 Country: USA	Zip: 33618 Country: USA

4. FEI Number: 59-3403737 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CHARLES C. BLAKE, III

Street Address (P.O. Box Number is Not Acceptable): 3550 BUSCHWOOD PARK DR. STE. 250

City: TAMPA **FL** Zip Code: 33618

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 _____ DATE
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE: OPTS NAME: CHARLES C. BLAKE, III STREET ADDRESS: 3550 BUSCHWOOD PARK DR. #250 CITY-ST-ZIP: TAMPA, FL 33618	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: 600026884266 01/13/04--01090--003 **550.00
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES C. BLAKE III 11/26/03 813-932-0767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #