

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000065280

**Entity Name:** BLANDINO FUNERAL HOMES, INC.

**Current Principal Place of Business:**

153 SEVILLA AVE.  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 140668  
CORAL GABLES, FL 33114

**FEI Number: 20-1032950**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

M.J.F. REGISTERED AGENT CORP.  
153 SEVILLA AVE.  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ARREDONDO, VIRGINIA  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

Title VP  
Name ARREDONDO, MARIA F  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

Title S  
Name ARREDONDO, JESUS F  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

Title D  
Name BLANDINO,AGUEDA, VIRGINIA  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

Title T  
Name ARREDONDO SANTANA JR,  
FERNANDO  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

Title D  
Name SANTANA, MARIA  
Address ABRAHAM LINCOLN #62, LA JULIA  
City-State-Zip: SANTO DOMINGO DR

*I hereby 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 all other like empowered.*

**SIGNATURE: ARREDONDO , VIRGINIA**

**P**

**06/01/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date