SIGNATURE: PEDRO EGOAVIL

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P11000061232

Entity Name: BLAP SERVICES, INC

## **Current Principal Place of Business:**

8301 NW 193RD LANE MIAMI, FL 33015

### **Current Mailing Address:**

8301 NW 193RD LANE MIAMI, FL 33015

# FEI Number: 30-0504318

## Name and Address of Current Registered Agent:

VIVANCOS, MIGUEL A 13511 SW 82ND ST MIAMI, FL 33183 US

, MIGUEL A B2ND ST

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

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## **Officer/Director Detail :**

Title	Р	Title	VP
Name	EGOAVIL, PEDRO A	Name	EGOAVIL, CARMEN L
Address	8301 NW 193RD LANE	Address	8301 NW 193RD LANE
City-State-Zip:	MIAMI FL 33015	City-State-Zip:	MIAMI FL 33015

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.

04/28/2014

Date

FILED Apr 28, 2014 Secretary of State CC1147983644

Certificate of Status Desired: No

Date