FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 188180 (4) BLACKWELL MAINTENANCE CORPORATION					1))
Principal Pla	ce of Business	Mailing Address			DII BIGII SIBII SIBII BIGII IBBI
2450 SW 137 AVE STE 221 MIAMI FL 33175 US		C/O MARICA B. CABALLERO 2450 S.W. 137TH AVENUE SUITE 221 MIAMI FL 33175 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				10/03/1955	
	2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite And # etc		59-09 16605	Not Applicable
22 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zιp	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30		Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	1 Agent
DE VARONA, FRANK 530 NW 54 ST MIAMI FL 33127			83	dress (P.O. Box Number is Not Acceptable)	
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little of applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DE VARONA, FRANK		1.2 NAME		
STREET ADDRESS	7755 SW 85TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE		Change Addition
NAME	DE VARONA, FRANK		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.1 TILLE 3.2 NAME		C cligings C Admition
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 Title		Change Addition
NAME			4. 2 NAME		-
STREET ADDRESS	,		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Ī
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-\$1-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	1		6.4 CITY - ST - ZIP		

4. Thereby 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 annual report or supplemental annual 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 13 if changed, or go a attachment without a supplemental trustee.

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PARTIDENT 2-16-93

R2E034 (10/97)

FILED

Apr 23 1998 8:00am

Secretary of State