## JAN 0 9 1997 FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 196492

(3)

BLANCO, INC.

Principal Place of Business

Mailing Address

\$195-102 AVE NORTH PINELLAS PARK FL-84888-0889 5195-102 AVE NORTH PINELLAS PARK FL 34666

## FILED Apr 23 1997 8:00am Secretary of State

				3. Date Incorporated or Qualified 3a. Date of Last Report 08/03/1956 05/01/1996					
2. Principal P	lace of Business	2a. Mailing Addre				4. F£I Number		Applied For	
21	22 1 1 1 1 1 1 1	26	1875.		:	59-1082640		Not Applicable	
Suite, Apt.	Suite, Apt. #, etc.  Suite, Apt. #, etc.  27				5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution				
Zip	Country	<b>28</b> ]				B. This corporation has liability for inlangible tax under s 199.032,			
24 3978		29 30782	37782-3599 30			Florida Statutes Yes No			
24, 0,7,0	9. Name and Address of Curren						Address of New Registered Agent		
RIAN	ICO,PETER J		<del></del>	81	Name		<u> </u>		
5195-102 AVENUE N PINELLAS PARK FL: 93565									
			82 Street Address (P.O. Box Number is Not Acceptable)						
rinc	LLNO FARR IL HOUR 95/6	2-39+1		83					
			84	City	₽-1 85 Zip Code				
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050, egistered agent, or both, in the State on familiar with, and accept the oblige	2 and 607.1508, Floric of Florida, Such chan ations of, Section 607.0	la Statutes, t ge was autho 0505, Florida	he above orized by Statutes	e-named c the corpo	orporation submits this statement for the $\rho$ oration's board of directors. I hereby accep	urpose of changi of the appointmen	ng its registered I as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and bite it applicable.	(NOTE Rep	gistered Age	nt signature re	equired when teinstating)	DATE	·	
12.	OFFICERS ANI	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12	
TITLE	PD	□ DE	LETE	1.1 TITLE			Cha	nge 🔲 Addition	
NAME	BLANCO,PETER J		1	1.2 NAME					
STREET ADDRESS	5195-102 AVE NORTH		1	1.3 STHELT	ADDRESS				
CITY-ST-ZIP	PINELLAS PARK FL		1	1.4 CITY - S	T- 21P				
TITLE	VD	Id 🔲	I FTE	2.1 TITLE			Cha	nge Addition	
NAME	BLANCO,BARBARA M.			2.2 NAME	ļ				
STREET ADDRESS	5195-102 AVE NORTH			2.3 STHEET	ADDRESS				
CITY-ST-ZIP	PINELLAS PARK FL	DIMENTAGE DADIC PA		2 4 CITY- S					
TITLE	ST	DE DE	DELETE 311				. Cha	nge 🔲 Addition	
NAME	BLANCO,BARBARA M.		ı	3.2 NAME			•		
STREET ADDRESS	5195-102 AVE NORT			3.3 STREET	ADDRESS				
CITY-ST-ZIP	PINELLAS PARK FL			3.4. Cl1Y- 5					
TITLE			4.1 TITLE			Cha	nge Addition		
NAME				4. 2 NAME	-				
STREET ADDRESS				4.3 STREET	ADORESS				
CITY-ST-ZIP				4.4 CITY-S	- 1				
TITLE		DE	LETE	5.1 TITLE			Cha	nge Addition	
NAME			I	5.2 NAME	)		-		
STREET ADDRESS				53 STREET	ADDRESS				
CITY-ST-ZIP				54 CITY-S	i				
TITLE		DE DE	LETE	61 TITLE	1 4"		Cha	nge Addition	
NAME				6 2 NAM!	-				
STREET ADDRESS				6.3 STREET	*DDDCCC				
CITY-ST-ZIP	hy north, that the information numerical	d with this filing door a	act auglity fo	64 CHY-S		ited in Section 119.07(3)(i) Florida Statuto	n I further earlier	that the	

I do needly that the information stipplied with his filling does not quality for the exemption stated in Section 1.19 of (3)(f), Florida Statutes. 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE.

Gasthill Mil Blandoll Sec. 1 (Reps 414 197

(813) 344.7505