


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 467926 1. Entity Name BLY'S PLANK, INC.	
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Principal Place of Business 111 SW THIRD ST. PENTHOUSE SUITE MIAMI, FL 33130-8924	Mailing Address 111 SW THIRD ST. PENTHOUSE SUITE MIAMI, FL 33130-8924
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03302007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1654107	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCCORMICK, EDWARD J.
111 SW THIRD ST.
MIAMI, FL

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MCCORMICK EDWARD J 111 SW 3RD ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MCCORMICK, SYLVIA M 111 S.W. 3RD ST. MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MCCORMICK, SEAN J 111 S.W. 3RD ST MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD MCCORMICK, EDWARD J 111 S.W. 3RD ST MIAMI, FL 33130
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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04/06/07-80027-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

304/m 07 305-358-4600

Date Daytime Phone #