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Mar 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F42049

(9)

1. Corporation Name

BLITZ INTERIOR CORPORATION

Principal Place of Business

3161 118TH AVE. NORTH
ST PETERSBURG FL 33716

Mailing Address

3161 118TH AVE. NORTH
ST PETERSBURG FL 33716-1865



2. Principal Place of Business

21 1710 Arabian Lane
Suite, Apt. #, etc.

2a. Mailing Address

26 1710 Arabian Lane
Suite, Apt. #, etc.

City & State

23 Palm Harbor, FL

City & State

28 Palm Harbor, FL

Zip

24 34685

Country

25 USA

Zip

29 34685

Country

30 USA

9. Name and Address of Current Registered Agent

RESIDENT AGENT CORP. OF PINELLAS COUNTY
980 TYRONE BLVD.
ST PETERSBURG FL 33710

3. Date Incorporated or Qualified

08/26/1981

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2113710

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 One progress Plaza, Suite 1210

84 City

ST. Petersburg

FL

85 Zip Code

33701

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 agent or registered agent or both in the State of Florida. Such change 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 *Alan M. Gross* alan m. gross

3/3/97

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

1.2 NAME BLIERNITZ, JURGEN

1.3 STREET ADDRESS 1710 ARABIAN LN

1.4 CITY - ST - ZIP PALM HARBOR FL 34685

2.1 TITLE ☐ DELETE

2.2 NAME BLIERNITZ, INGRID C

2.3 STREET ADDRESS 1710 ARABIAN LN

2.4 CITY - ST - ZIP PALM HARBOR FL 34685

3.1 TITLE ☐ DELETE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ DELETE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ DELETE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ DELETE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ingrid Bliernitz* Ingrid Bliernitz

3/17/97 813-784-8707

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)