## 2007 FOR PROFIT CORPORATION

## ANNUAL REPORT (AR) DOCUMENT # F87284

1. Entity Namo



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

| BLANCO INTERNATIONAL SERVICE, INC.  |   |   |                       |                            |   |   | Se   | cretai                           | y 01 1                                   | State  |  |
|---|---|---|-----------------------|----------------------------|---|---|--|----------------------------------|--|--|--|
| Principal Place of Business  4919 SW 75 AVE PO BOX 882 RIVERSIDE STATION MIAMI FL 33155  Mailing Address  4919 SW 75 AVE PO BOX 882 RIVERSIDE STATION MIAMI FL 33155  |   |   |                       |                            | E STATION   |   |  |                                  |  |  |  |
| Principal Place of Business - No P.O. Box #   |   |   |                       | ng Address                 |   | 7   |  |                                  |  |  |  |
| Suite, Apt. #, etc.   |   |   | Suite                 | Suite, Apt. #, etc.        |   |   | t MOORE  | CR2E034                          | (10/06)                                  |  |  |
| City & Stato  |   |   | City (                | City & Stato               |   |   | 4. FEI Number 59-2196470 Applied For Not Applied ble |                                  |  | <u> </u>                                       |  |
| Zıp   |   | Country   | Zip                   |                            | Country   | 5. Cortificate                              | o of Status Dosired                                  |                                  | \$8.75 Addee Require                     |  |  |
| Name and Address of Current Registered Agent  |   |   |                       |                            |   | 7. Name and Address of New Registered Agent |  |                                  |  |  |  |
| LVONG BIOLIARD W  |   |   |                       |                            | Namo  |   |  |                                  |  |  |  |
| LYONS, RICHARD W.<br>1230 N.W. 7 ST.<br>MIAMI FL  |   |   |                       |                            | Stroot Address  | s (P.O. Box Numb                            | per is Not Acceptab                                  | ole)                             |  |  |  |
|   |   |   |                       |                            | City  |   |  |                                  | Zip Coc                                  | to .   |  |
| 8. The above named entity submits this statement for the purpose of changing its register   |   |   |                       |                            |   |   |  |                                  |  |  |  |
|   | named enuly<br>tions of regist  |   | Tor the purpo         | oso of changing its r      | egisierea office or regist  | iored agent, or be                          | oin, in ino State of F                               | -iorida, i am ia                 | amiliar wiin,                            | and accept                                     |  |
| SIGNATURE .   | Signature, typed  | or printed name of registered aga               | ent and title r appli | cable (NOTE:               | Registered Agent signature requi  | rad when reinstating)                       |  | DATE                             |  | <del></del> -                                  |  |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State  |   |   |                       |                            |   |   | 9. Election Camp                                     | paign Financir                   |  | . <b>00</b> May Be                             |  |
|   |   |   |                       |                            |   |   | Trust Fund Co  | ontribution.                     | Add₁                                     | ed to Fees                                     |  |
|   | k Payable to  |   | of State              | RS                         | 11.   | ADDITIONS                                   | Trust Fund Co  |                                  |  | -  |  |
| Make Check  | k Payable to  | • Florida Department • OFFICERS AN              | of State              | RS Delete                  | <b>11</b> .   | ADDITIONS                                   |  | FICERS AND                       |  | -  |  |
| Make Check<br>10.<br>HILL<br>NAME.  | PV<br>BLANCO,   | DEPOSITION OFFICERS AND DANIEL                  | of State              |                            | TITLE<br>NAME:  | ADDITIONS                                   | CHANGES TO OF  | FICERS AND                       | DIRECTOR  Change                         | S IN 11  |  |
| Make Check 10. III.E NAME. STREET ADDRESS   | PV<br>BLANCO,<br>5220 SW  | D Florida Department OFFICERS AND DANIEL 72 AVE | of State              |                            | TITLE NAME STREET ADDRESS   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND                       | DIRECTOR  Change                         | S IN 11  |  |
| Make Check 10. III.E NAME. STREET ADDRESS CHY- ST-ZIP   | PV<br>BLANCO,<br>5220 SW 7  | D Florida Department OFFICERS AND DANIEL 72 AVE | of State              | ☐ Delete                   | TITLE NAME: STREET ADDRESS CITY-ST-ZIP  | ADDITIONS                                   |  | FICERS AND<br>886949<br>80021-00 | DIRECTOR Change                          | S IN 11 Addition                               |  |
| Make Check 10.  III.t NAME. SIREE ADDRESS CHY-SI-7/IP III.E   | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL                               | DANIEL 72 AVE00000                              | of State              |                            | IIILE NAMI: SIREET ADDRESS CITY-SI-ZIP IIILE  | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR  Change                         | S IN 11  |  |
| Make Check 10. III.E NAME. STREET ADDRESS CHY- ST-ZIP   | PV<br>BLANCO,<br>5220 SW 7  | DANIEL 72 AVE 000000                            | of State              | ☐ Delete                   | TITLE NAME: STREET ADDRESS CITY-ST-ZIP  | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR Change                          | S IN 11 Addition                               |  |
| Make Check 10.  III.t NAMI. SIREEL ADDRISS CHY-SI-ZIP III.E NAMI.   | PV<br>BLANCO,<br>5220 SW MIAMI, FL<br>ST<br>BLANCO,                   | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Delete                   | IIILE NAMI: SIREET ADDRESS CITY-SI-ZIP IIILE NAME   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR Change                          | S IN 11 Addition                               |  |
| Make Check  10.  III.L  NAME.  SIREEL ADDRESS  CHY-SI-7/IP  III.E  NAME.  SIREEL ADDRESS  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Delete                   | IIILE NAMI: SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS  | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR Change                          | S IN 11 Addition                               |  |
| Make Check  10.  III.d.  NAME.  SIREEL ADDRESS  CHY-SI-ZIP  III.E.  NAME.  SIREEL ADDRESS  CHY-SI-ZIP  III.E.  NAME.  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Delete                   | IIILE NAME STREET ADDRESS CITY- ST- ZIP IIILE NAME STREET ADDRESS CITY- ST- ZIP IIIL NAME   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR  Change  150.1                  | S IN 11 Addition                               |  |
| Make Check  10.  III.C.  NAME.  SIRIET ADDRESS  CITY-SI-ZIP  III.C.  NAME.  SIRIET ADDRESS  CITY-SI-ZIP  III.C.  NAME.  SIRIET ADDRESS  CITY-SI-ZIP   | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Delete                   | IIILE NAME STREET ADDRESS CITY- ST- ZIP IIILE NAME STREET ADDRESS CITY- ST- ZIP IIIL NAME STREET ADDRESS STREET ADDRESS   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>886949<br>80021-00 | DIRECTOR  Change  150.1                  | S IN 11 Addition                               |  |
| Make Check  10.  III.EE NAME. SIREET ADDRESS CITY- SI- ZIP  III.EE NAME. SIREET ADDRESS CITY- SI- ZIP  IVILE NAME SIREET ADDRESS CITY- SI- ZIP  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Defete ☐ Defete ☐ Defete | ITILE NAMI: STREET ADDRESS CITY-SI-ZIP  TILE NAME STREET ADDRESS CITY-SI-ZIP  TILL NAME. STREET ADDRESS CITY-SI-ZIP   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>86949<br>80021-00  | DIRECTOR  Change  Change                 | S IN 11 Addition  Addition  Addition           |  |
| Make Check  10.  III.EE NAME. SEREEL ADDRESS CHY-SI-ZIP  III.EE NAME. SEREEL ADDRESS CHY-SI-ZIP  III.EE NAME SEREEL ADDRESS CHY-SI-ZIP  III.EE NAME SEREEL ADDRESS CHY-SI-ZIP   | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Delete                   | IIILE NAMI: STREET ADDRESS CITY-SI-ZIP IIILE NAME STREET ADDRESS CITY-SI-ZIP IIILL NAME. STREET ADDRESS CITY-SI-ZIP IIILL NAME. STREET ADDRESS CITY-SI-ZIP IIILE  | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>86949<br>80021-00  | DIRECTOR  Change  150.1                  | S IN 11 Addition                               |  |
| Make Check  10.  III.EE NAME. SEREEL ADDRESS CHY-SI-ZIP  III.EE NAME. SEREEL ADDRESS CHY-SI-ZIP  III.EE NAME SEREEL ADDRESS CHY-SI-ZIP  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Defete ☐ Defete ☐ Defete | ITILE NAMI: STREET ADDRESS CITY-SI-ZIP  TILE NAME STREET ADDRESS CITY-SI-ZIP  TILL NAME. STREET ADDRESS CITY-SI-ZIP   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>86949<br>80021-00  | DIRECTOR  Change  Change                 | S IN 11 Addition  Addition  Addition           |  |
| Make Check 10.  III.C.  NAME.  SIRRET ADDRESS CITY-ST-ZIP  III.C.  NAME.  SIRRET ADDRESS CITY-ST-ZIP  III.E.  NAME.  SIRRET ADDRESS CITY-ST-ZIP  III.E.  NAME.  NAME.   | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Defete ☐ Defete ☐ Defete | IIILE NAMI: SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS CITY-SI-ZIP IIILL NAME. SIREET ADDRESS CITY-SI-ZIP IIILL NAME. SIREET ADDRESS CITY-SI-ZIP IIILE NAME   | ADDITIONS                                   | CHANGES TO OF  | FICERS AND<br>86949<br>80021-00  | DIRECTOR  Change  Change                 | S IN 11 Addition  Addition  Addition           |  |
| Make Check 10.  III.C.  NAME.  SIREET ADDRESS CITY-ST-ZIP                            | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | ☐ Defete ☐ Defete ☐ Defete | IIILE NAMI: SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS CITY-SI-ZIP IIILL NAME. SIREET ADDRESS CITY-SI-ZIP IIILE NAME SIREET ADDRESS   | ADDITIONS                                   | CHANGES TO OF  | 86949<br>80021-00                | DIRECTOR  Change  Change                 | S IN 11 Addition  Addition  Addition           |  |
| Make Check  10.  III.I.  NAME.  SIRTET ADDRESS CITY-SI-ZIP  III.E.  NAME.  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | Delete Delete              | ITILE NAME STREET ADDRESS CITY-SI-ZIP  HILE NAME STREET ADDRESS CITY-SI-ZIP  HILL NAME STREET ADDRESS CITY-SI-ZIP  HILE NAME STREET ADDRESS CITY-SI-ZIP  HILE NAME STREET ADDRESS CITY-SI-ZIP  HILE NAME  | ADDITIONS                                   | CHANGES TO OF  | 86949<br>80021-00                | DIRECTOR  Change  Change  Change         | S IN 11 Addition  Addition  Addition           |  |
| Make Check  10.  III.I.  NAME.  SIRTET ADDRESS CITY-SI-ZIP  III.E.  NAME.  SIRTET ADDRESS SIRTET ADDRESS SIRTET ADDRESS         | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | Delete Delete              | ITILE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP   | ADDITIONS                                   | CHANGES TO OF  | 86949<br>80021-00                | DIRECTOR  Change  Change  Change         | S IN 11 Addition  Addition  Addition           |  |
| Make Check  10.  III.E  NAME.  SIREEL ADDRESS  CITY-SI-ZIP  CITY-SI-ZIP  CITY-SI-ZIP | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | Delete Delete Delete       | IIILE NAME STREET ADDRESS CITY-ST-ZIP | ADDITIONS                                   | CHANGES TO OF  | 86949<br>30021-00                | DIRECTOR  Change  Change  Change  Change | S IN 11 Addition  Addition  Addition  Addition |  |
| Make Check  10.  III.II NAME. SIREET ADDRESS CITY-SI-ZIP  III.E NAME. SIREET ADDRESS CITY-SI-ZIP  III.E NAME SIREET ADDRESS  | PV<br>BLANCO,<br>5220 SW 7<br>MIAMI, FL<br>ST<br>BLANCO,<br>5220 SW 7 | DANIEL 72 AVE 000000  DIGNA 72 AVE              | of State              | Delete Delete              | ITILE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP   | ADDITIONS                                   | CHANGES TO OF  | 86949<br>30021-00                | DIRECTOR  Change  Change  Change         | S IN 11 Addition  Addition  Addition           |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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 a page 25.

CITY-ST-71P

SIGNATURE:

CHY-SI-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DRES. Bale Days TWO Phone &