


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90044 035 ***150.00

DOCUMENT # F92737	
1. Entity Name BLANC PAGE, INC.	

Principal Place of Business 15001 S.W. 256 STREET HOMESTEAD, FL 33032	Mailing Address 15001 S.W. 256 STREET HOMESTEAD, FL 33032
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2. Principal Place of Business 12011 SW 129th CT	3. Mailing Address 12011 SW 129th CT
Suite, Apt. #, etc. Unit #4	Suite, Apt. #, etc. Unit #4
City & State Miami, FL	City & State Miami, FL
Zip 33186	Country USA

00000000

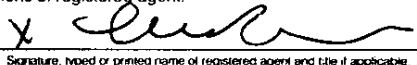


07122005 Chg-P CR2E034 (10/03)

4. FEI Number 95-2955945	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent RICHARDSON, LARRY W 15001 S.W. 256 STREET HOMESTEAD, FL 33032	
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7. Name and Address of New Registered Agent Name RICHARDSON, LARRY W Street Address (P.O. Box Number is Not Acceptable) 12011 SW 129th CT, Unit #4 City Miami State FL Zip Code 33186	
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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 X 	DATE 7-12-2005

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

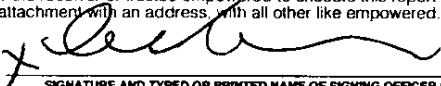
9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RICHARDSON, LARRY W 15001 S.W. 256 STREET HOMESTEAD, FL 33032 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	RICHARDSON, LARRY W. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 SW 129th CT, Unit #4 Miami, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RICHARDSON, MARGARET D 15001 S.W. 256 STREET HOMESTEAD, FL 33032 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Richardson, Margaret D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 SW 129th CT, Unit #4 Miami, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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: X 	DATE 7-12-05 (305) 252-7727
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Daytime Phone #