

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **G96673** (0)

1. Corporation Name

**BLEDOU CORPORATION**



Principal Place of Business

Mailing Address

**C/O CADWALADER, WICKERSHAM & TAFT  
440 ROYAL PALM WAY, S300  
PALM BEACH FL 33480**

**C/O CADWALADER, WICKERSHAM & TAFT  
440 ROYAL PALM WAY, S300  
PALM BEACH FL 33480**

2. Principal Place of Business

21 **440 Royal Palm Way**

Suite, Apt. #, etc.

22 **#200**

City & State

23 **Palm Beach, FL**

Zip Country

24 **33480**

25

2a. Mailing Address

26 **440 Royal Palm Way**

Suite, Apt. #, etc.

27 **#200**

City & State

28 **Palm Beach, FL**

Zip Country

29 **33480**

30

3. Date incorporated or Qualified

**04/18/1984**

3a. Date of Last Report

**04/26/1995**

4. FEI Number

**65-0118394**

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

9. Name and Address of Current Registered Agent

**CHOPIN, L. FRANK  
CHOPIN, MILLER & YUDENFREUND  
440 ROYAL PALM WAY, STE. 200  
PALM BEACH FL 33480**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

**FL**

B5 Zip Code

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 office 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

Signature of person in charge of recordkeeping and filing of report

(If filer is Registered Agent sign when required when filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSD**  
NAME **CHOPIN, L. FRANK**  
STREET ADDRESS **440 ROYAL PALM WAY, STE. 200**  
CITY-ST-ZIP **PALM BEACH FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
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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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/18/96

(407)655-9500

Date

Daytime Phone

CR2E034 (12/95)