

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H39213

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: BLADE & BLADE, P.A.

**Current Principal Place of Business:**

515 SOUTH FEDERAL HIGHWAY  
1180 S. POWERLINE RD.  
DEERFIELD BCH, FL 33441 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 SOUTH FEDERAL HWY  
DEERFIELD BEACH, FL 33441 US

**New Mailing Address:**

FEI Number: 59-2481028

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLADE, PAUL E.  
515 SOUTH FEDERAL HIHGWAY  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: BLADE, PAUL E.,  
Address: 515 S FEDERAL HWY  
City-St-Zip: DEERFIELD BCH, FL

Title: STD ( ) Delete  
Name: BLADE, WILLIAM P  
Address: 515 S FEDERALY HWY  
City-St-Zip: DEERFIELD BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: BLADE, PAUL E  
Address: 515 S FEDERAL HWY  
City-St-Zip: DEERFIELD BCH, FL

Title: STD (X) Change ( ) Addition  
Name: BLADE, WILLIAM P  
Address: 515 S FEDERALY HWY  
City-St-Zip: DEERFIELD BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL E. BLADE

PRES

01/05/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date