

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K72348** (1)

1. Corporation Name

BLUMVEST, INC.



Principal Place of Business

Mailing Address

% PAUL H. FREEMAN
9100 S. DADELAND BLVD., 1406 DATRAN CENTER
MIAMI FL 33156

% PAUL H. FREEMAN
9100 S. DADELAND BLVD., 1406 DATRAN CENTER
MIAMI FL 33156

3. Date Incorporated or Qualified
03/13/1989

3a. Date of Last Report
05/01/1995

4. FEI Number
59-2138520

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

25 24 25 29 30 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREEMAN, PAUL H.
1406 DATRAN CENTER
9100 S. DADELAND BLVD.
MIAMI FL 33156**

81 Name

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

83

84 City

FL

85 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 named as registered agent and the applicable

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PSD**
STREET ADDRESS **FREEMAN, PAUL H.**
CITY - ST - ZIP **9100 S. DADELAND BLVD.**
MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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64 CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/5/96

(305) 670-5999

CR2E034 (3/96)