

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028097

FILED  
May 01, 2005  
Secretary of State

Entity Name: BLANO, LLC

**Current Principal Place of Business:**

510 NW 17TH STREET  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

510 NW 17TH STREET  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

PHILLIPSMATHIS, LLC  
201 WEST FLAGLER STREET  
MIAMI, FL 33130 US

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: SCOTT, TERENCE U  
Address: 510 NW 17TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR ( ) Delete  
Name: MCDUGAL, KEVIN T  
Address: 632 NW 21ST COURT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR ( ) Delete  
Name: JONES, JOHN V  
Address: 416 NW 9TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR ( ) Delete  
Name: BOYD, DANNY W  
Address: 2161 NW 10TH COURT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR ( ) Delete  
Name: ROBINSON, ROBERT C  
Address: 499 NW 19TH COURT  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGR ( ) Delete  
Name: NAJI, KALIAH A  
Address: 3101 NW 47TH TERRANCE  
City-St-Zip: LAUDERDALE LAKES, FL 33319

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT C ROBINSON

MGR

05/01/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date