## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000052640

Entity Name: BLMS, LLC

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7311 SW 63 CRT 5902 SW 105TH STREET SOUTH MIAMI, FL 33143 MIAMI, FL 33156 US

Current Mailing Address: New Mailing Address:

PO BOX 33022 5902 SW 105TH STREET MIAMI, FL 33233 MIAMI, FL 33156 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SAMUELS, MICHAEL
7321 SW 63 COURT
MIAMI, FL 33143 US

SAMUELS, MICHAEL
4001 UTOPIA COUR
MIAMI, FL 33133 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: MICHAEL SAMUELS 04/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 JACOBS, MICHAEL J
 Name:
 JACOBS, MICHAEL J

 Address:
 4801 UTOPIA CRT
 Address:
 4001 UTOPIA CRT

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:
 MIAMI, FL 33133 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name:LADIS, BARRYName:LADIS, BARRY AAddress:C/O SAMUELS 4801 UTOPIA CTAddress:5902 SW 105TH STREETCity-St-Zip:MIAMI, FL 33133City-St-Zip:MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BARRY LADIS MR. 04/20/2009