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FILED

Apr 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L14167 (5)

1. Corporation Name
B L P MANAGEMENT, INC.



Principal Place of Business

Mailing Address

~~1707 ERNA DR~~
~~TAMPA FL 33606~~

~~1707 ERNA DR~~
~~TAMPA FL 33603-2804~~

2. Principal Place of Business

21 1537 RIVERDALE DRIVE

2a. Mailing Address

26 1537 RIVERDALE DR

3. Date Incorporated or Qualified

09/05/1989

3a. Date of Last Report

04/08/1996

4. FEI Number

59-2068214

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

23 OLDSMAR, FL.

28 OLDSMAR, FL

24 34077

25 PINELLAS

29 34077

30 PINELLAS

9. Name and Address of Current Registered Agent

PEREZ, BENITO L.
1707 ERNA DR
TAMPA FL 33603-2804

10. Name and Address of New Registered Agent

81 Name

SAME

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

1537 RIVERDALE DRIVE

83

84 City

OLDSMAR

FL

85

Zip Code

34077

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME PEREZ, BENITO L.
STREET ADDRESS 1707 ERNA DR
CITY - ST - ZIP TAMPA FL

☐ DELETE

TITLE V
NAME PEREZ, VILMA M.
STREET ADDRESS 1707 ERNA DR
CITY - ST - ZIP TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SAME
1.2 NAME SAME
1.3 STREET ADDRESS 1537 RIVERDALE DRIVE
1.4 CITY - ST - ZIP OLDSMAR, FL. 34077

☒ Change

☐ Addition

2.1 TITLE SAME
2.2 NAME SAME
2.3 STREET ADDRESS 1537 RIVERDALE DRIVE
2.4 CITY - ST - ZIP OLDSMAR, FL 34077

☒ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE:

BENITO L. PEREZ 04-16-97 813-789-9772

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0369239

CR2E034 (9/96)