## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED DOCUMENT # L53977 Apr 26, 2004 08:00 AM 1. Entity Name **Secretary of State** BLAYSTRAN ENTERPRISES, INC. Principal Place of Business Mailing Address 402 S.E. 1ST AVENUE P.O. DRAWER 900310 FLORIDA CITY, FL 33034 HOMESTEAD, FL 33090 01062004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0204654 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARCUS, MICHAEL J. DO NOT WRITE 317 NORTH KROME AVE. HOMESTEAD, FL 33030 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS me NAME BLAYLOCK, LAWRENCE H. U00000128824 04/26/04-80054-007 150.00 STREET ADDRESS 724 SOUTH FLAGLER CATTY-ST-ZIP HOMESTEAD, FL VPSD mle NAME SANCHEZ, CRYSTAL B 19490 SW 232ND ST STREET ADDRESS CRY-SE-7P MIAMI, FL 33170 333.F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP m.e IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-57-782 TILLE NAME

12. I horoby certify that the information suppried 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 report or supplemental report is true, and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employeed to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a regulators with all other like empowered.

SIGNATURE/\_

STREET ADDRESS City-St-Zip

Myddl Lawrence H. Blaylock, Pres.

4-21-04

305-247-7249

Daytme Phone #