2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 17, 2004 8:00 am Secretary of State

ANNUAL REPORT					Secretary of State			
1. Entity Nam	MENT # L86394 BLE COMPUTERS, INC.				05-17-2004 9001			
Principal Place		Mailing Address				OH		
1507 N SATURN AVE 292 US ALT 19 N CLEARWATER, FL 33755 US PALM HARBOR, FL 3468			3 US		24076107			
					I adala arkad iliko arka alah diak birki dibi	A BURK KURU BUK	1081	
2. Principal P	Place of Business	3. Mailing Address	pite Av					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			03082003 Chg-P CR2E034 (10/03)			
City & State Cleanuater Cleanuater				4. FEI Number Applied For 59-3017538 Not Applicable				
Zip Country Zip 72766			Country USA		5. Certificate of Status Desired S8.75 Additional Fee Required			
8. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
IVAN SERRANO Nam				IVAN SERRANO				
	TURN AVE	Street Ad	Address (P.O. Box Number is Not Acceptable)					
CLEARWA	ATER, FL 33755	:	22	IN Japi	tentive			
			7					
City Clene					FL	Zip Code		
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, a 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							and accept	
FILE NOWI!! FEE.IS \$150.00 Due by September 8, 2004 9. Election Campaign Trust Fund Contrib			~ —	\$5.00 May Be Added to Fees	In accordance with s. 607. corporation did not receive	.193(2)(b), the prior r	F.S., the notice.	
10. OFFICERS AND DIRECT			11.	ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
NAME	PD SERRANO, IVAN	☐ Delete	TITLE NAME	27	V DAWA	Change -	Addition	
STREET ADDRESS	1508 NORTH SATURN AVENUE		STREET ADDRESS	JVAN SE	1 DI	<i>)</i> - 1	33755	
CITY-ST-ZIP	CLEARWATER, FL		CITY-ST-ZIP	ZZZN. Juj	ocker Ave Clear	rwotes	71	
TITLE		☐ Delete	THILE		RRAWO Diter Ave Clear	☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME OTREET ADDRESS			NAME				1	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		□ Delete	TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP		ــــــــــــــــــــــــــــــــــــــ	CITY-ST-ZIP					
NAME		Delete	TITLE			Change	Addition	

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TOS. IVAN SERRANO

☐ Delete

5/10/04

727-447-1000

Change

☐ Addition