

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Feb 28 1997 8:00am
Secretary of State

DOCUMENT # L95973 (8)

1. Corporation Name
BLS ENTERPRISES, INC.



Principal Place of Business
2000 NW 16 STREET
POMPANO BEACH FL 33060
US

Mailing Address
2000 NW 16 STREET
POMPANO BEACH FL 33069-1629
US

3. Date Incorporated or Qualified 08/22/1990	3a. Date of Last Report 07/26/1996
4. FEI Number 65-0243064	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent BIEDERMAN, SHERVIN 10901 DENOEU ROAD PH A BOYNTON BCH FL 33437	10. Name and Address of New Registered Agent 81 Name Sherwin Biederman 82 Street Address (P.O. Box Number is Not Acceptable) 10861 Denoeu Rd 83 84 City Boynton Beach, FL 85 Zip Code 33437
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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 *Sherwin Biederman* DATE 2/22/17
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P NAME BIEDERMAN, LISE STREET ADDRESS 10901 DENOEU ROAD CITY-ST-ZIP BOYNTON BCH FL	1.1 TITLE 1.2 NAME Lise Biederman 1.3 STREET ADDRESS 10861 Denoeu Rd 1.4 CITY-ST-ZIP Boynton Beach, FL 33437
TITLE VP NAME BIEDERMAN, SHERVIN STREET ADDRESS 10901 DENOEU ROAD CITY-ST-ZIP BOYNTON BCH FL	2.1 TITLE 2.2 NAME UP Sherwin Biederman 2.3 STREET ADDRESS 10861 Denoeu Rd 2.4 CITY-ST-ZIP Boynton Beach, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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: *Sherwin Biederman* 2-27-97 954-984-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)