2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 08:00 AN Secretary of State

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Entity Name

BLUMBERG INDUSTRIES, INC.



Principal Place of Business 5770 MIAMI LAKES DR. MIAMI LAKES, FL 33014-3707 Mailing Address

5770 MIAMI LAKES DR. ATTN: CONTROLLER MIAMI LAKES, FL 33014-2418 US



DO NOT WRITE IN THIS SPACE

01042008 No Chg-P

CR2E034 (11/05)

4. FEI Number 11-1542040 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDBLUM, LAURA 5770 MIAMI LAKES DR. MAIMI LAKES, FL 33104

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	rnamed entity subtritts this statement for the pi cions of registered agent.	surpose of changing its registere	rea onice or reg	istered agent, or bot	in, in the State of Florida. Familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registere	ed Agent signature re	quired when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	1 1 1 1 1 1 1	· 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP BLUMBERG, MAX 5770 MIAMI LAKES DR. MIAMI LAKES, FL 33014					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOLDBLUM, L 5770 MIAMI LAKES DR. MIAMI LAKES, FL 33014				U00000931750 05/22/08-80026-022-150-00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.						