2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M71916

City-St-Zip:

PENSACOLA, FL 32502

Entity Name: BLAB OF SARASTOA, INC

FILED Apr 12, 2005 Secretary of State

Littly Nan	ile. BLAD OF	SARASTOA, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
47 S PALM STE 211	I BLVD				
SARASOT	A, FL 34236	US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
P.O. BOX 12836 STE "D" PENSACOLA, FL 32591 US		P.O. BOX 12836 STE PENSACOLA, FL 32591	US		
FEI Number:		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
GUERCIO, 47 S PALM STE 211 SARASOTA		JS			
The above in the State	named entity s of Florida.	ubmits this statement for the pu	rpose of changing its registered o	ffice or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () GUERCIO, DON 463 MEADOW L SARASOTA, FL	ARK DR	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () VIGODSKY, FR 121 S PALAFOX PENSACOLA, F	(ST., SUITE	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address:	ST () VIGODSKY, BR 121 S PALAFOX		Title: () Name: Address:	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: FRED L VIGODSKY VD 04/12/2005