

FILED
Jun 25, 2001 8:00 am
Secretary of State

05-22-2001 90629 032 ***158.75

2001 UNIFORM BUSINESS REPORT (UAR)**DOCUMENT #** 00000052837**1. Entity Name**BLANC DEBRIS INC (LP)**Principal Place of Business****Mailing Address**3422 ZARA WAY3422 ZARA WAYClearwater FL 33761Clearwater FL 33761**2. Principal Place of Business****3. Mailing Address****Suite, Apt. #, etc.****Suite, Apt. #, etc.****City & State****City & State****Zip****Country****Zip****Country****4. FEI Number****Applied For**☐ **Not Applicable****5. Certificate of Status Desired**☒**\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**KERRI McDONALD**Name**3422 ZARA WAY**Street Address (P.O. Box Number is Not Acceptable)**Clearwater FL 33761**City****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.****SIGNATURE**KERRI McDONALDSignature is typed or printed name of registered agent and the F applicable.NOTE: Registered Agent signature required when retaining.**DATE**4-30-01**9. This corporation is eligible to satisfy its intangible tax filing requirements and elects to do so. (See criteria on back)**☐**10. Election Campaign Financing Trust Fund Contribution.**☐**\$5.00 May be Added to Fees****11. OFFICERS AND DIRECTORS**

TITLE	<u>President</u>	☐ Delete
NAME	<u>KERRI McDONALD</u>	
STREET ADDRESS	<u>3422 ZARA WAY</u>	
CITY-STATE-ZIP	<u>Clearwater FL 33761</u>	

TITLE	<u>Vice President</u>	☐ Delete
NAME	<u>JON RICHARD McDONALD</u>	
STREET ADDRESS	<u>3422 ZARA WAY</u>	
CITY-STATE-ZIP	<u>Clearwater FL 33761</u>	

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
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13. 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 11 or Block 12 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:KERRI McDONALDSignature and typed or printed name of signed officer or directorDateSignature Print #