

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 25, 2002 8:00 am**  
**Secretary of State**

07-25-2002 90121 005 \*\*\*150.00

**DOCUMENT # P00000061264**

1. Entity Name  
**BLANCO ENTERPRISES GROUP, INC.**

Principal Place of Business

7760 NW 161 TE  
 MIAMI FL 33016

Mailing Address

7760 NW 161 TE  
 MIAMI FL 33016

2. Principal Place of Business

16389 NW 67 AVE

3. Mailing Address

16389 NW 67 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Lakes, FL

City & State

Miami Lake, FL

Zip

33014

Country

USA

Zip

33014

Country

USA

4. FEI Number

65-1139416

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

BLANCO, EDUARDO

8384 N.W. 143RD TERRACE

MIAMI FL 33016

7. Name and Address of New Registered Agent

Name

Blanco, Eduardo

Street Address (P.O. Box Number is Not Acceptable)

7218 Jacaranda Ln

City

Miami Lakes

FL

Zip Code

33014

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, and accept 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)

7/23/02  
 DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution.

☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLANCO, EDUARDO 8384 N.W. 143RD TERRACE MIAMI FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLANCO, Eduardo 7218 JACARANDA LN MIAMI LAKES FL 33014 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/23/02

305-609-5937

CR2E034 (4/02)



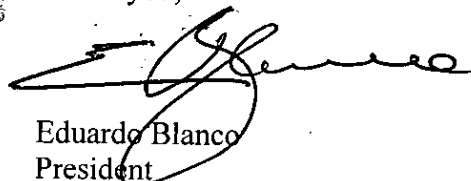
Attachment #  
P000000061264  
122846

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I am requesting that the late fee for filing the Uniform Business Report be waived. I did not receive notice of filing for 2002 prior to July 19, 2002. Enclosed please find the form and a check in the amount of \$150.00. Please accept this check as full payment for the filing fees.

Thank you,

  
Eduardo Blanco  
President