

# 2001 UNIFORM BUSINESS REPORT (UBR)

8/2:

**FILED**  
**Sep 10, 2001 8:00 am**  
**Secretary of State**

08-21-2001 90005 011 \*\*\*550.00

DOCUMENT # P00000067927

1. Entity Name

BML ENTERPRISES, INC.

Principal Place of Business

10730 NW 66TH ST BLDG A #213  
 MIAMI FL 33178

Mailing Address

10730 NW 66TH ST BLDG A #213  
 MIAMI FL 33178

2. Principal Place of Business

3300 NE 191 ST

3. Mailing Address

3300 NE 191 ST

Suite, Apt. #, etc.

Apt # 1213

Suite, Apt. #, etc.

Apt # 1213

City & State

AVENTURA, FL

City & State

AVENTURA, FL

Zip

33180

Country

USA

Zip

33180

Country

USA

4. FEI Number

59-3665881

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BIANCALANA, LUIS

10730 NW 66TH ST BLDG A #213  
 MIAMI FL 33178

7. Name and Address of New Registered Agent

Name: LUIS BIANCALANA

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

3300 NE 191 ST

Apt # 1213

City: AVENTURA

FL

Zip Code

33180

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

*[Signature]*

LUIS BIANCALANA

8/13/01

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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 12, 2001 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

TITLE: PRESIDENT; V. PRES.  
 NAME: LUIS BIANCALANA  
 STREET ADDRESS: 3300 NE 191 ST # 1213  
 CITY-ST-ZIP: AVENTURA FL 33180 ☐ Delete

TITLE: TREASURER  
 NAME: LUIS BIANCALANA  
 STREET ADDRESS: 3300 NE 191 ST # 1213  
 CITY-ST-ZIP: AVENTURA FL 33180 ☐ Delete

TITLE: SECRETARY  
 NAME: LUIS BIANCALANA  
 STREET ADDRESS: 3300 NE 191 ST # 1213  
 CITY-ST-ZIP: AVENTURA FL 33180 ☐ Delete

TITLE: ☐ Delete  
 NAME: ☐ Delete  
 STREET ADDRESS: ☐ Delete  
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
 NAME: ☐ Delete  
 STREET ADDRESS: ☐ Delete  
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
 NAME: ☐ Delete  
 STREET ADDRESS: ☐ Delete  
 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 CITY-ST-ZIP: ☐ Change ☐ 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]*

LUIS BIANCALANA

8/13/01

305 4953696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2004 (5/01)