

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jul 09, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000086918

1. Entity Name
BLAIR PROMOTIONS & LOGISTICS, INC.



Principal Place of Business
4420 SW 88 AVE.
MIAMI, FL 33165

Mailing Address
4420 SW 88 AVE.
MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE



05052004 No Chg-P CR2E034 (10/03) *

4. FEI Number
65-1041144

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLAIR, JULIET
3441 SW 29 TERRACE
MIAMI, FL 33133

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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 Juliet Blair JULIET BLAIR - P

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|----------------|--------------------|
| TITLE | P |
| NAME | BLAIR, JULIET |
| STREET ADDRESS | 3441 SW 29 TERRACE |
| CITY-ST-ZIP | MIAMI, FL 33133 |
| TITLE | VP |
| NAME | BLAIR, JOHN R |
| STREET ADDRESS | 3441 SW 29 TERRACE |
| CITY-ST-ZIP | MIAMI, FL 33133 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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07/09/04-80017-015 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: Juliet Blair

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/4/04 786 316 2087

Daytime Phone #