

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000073955

Entity Name: BLIS MANAGEMENT, INC.

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

1 INDIAN CREEK ISLAND
MIAMI BEACH, FL 33154

New Principal Place of Business:

Current Mailing Address:

2101 CORPORATE BLVD.
SUITE 107
BOCA RATON, FL 33431

New Mailing Address:

C/O TESCHER & SPALLINA, P.A.
2101 CORPORATE BLVD. SUITE 107
BOCA RATON, FL 33431

FEI Number: 65-1125401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M & W AGENTS, INC.
2101 CORPORATE BLVD., SUITE 107
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRAMAN, IRMA
Address: 1 INDIAN CREEK ISLAND
City-St-Zip: MIAMI BEACH, FL 33154

Title: ST () Delete
Name: LEIBOWITZ, BLOSSOM
Address: 1039 GUI SANDO DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: VP () Delete
Name: FENNER, LINDA
Address: 5030 ALBION WAY
City-St-Zip: LITTLETON, CO 80121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: IRMA BRAMAN

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date