

FILED

03 SEP 18 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000040933																							
1. Entity Name BLINCK, INC.																							
Principal Place of Business 380 NE SPANISH TRAIL BOCA RATON, FL 33432		Mailing Address 380 NE SPANISH TRAIL BOCA RATON, FL 33432																					
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																					
LINCK, BARBARA N 380 NE SPANISH TRAIL BOCA RATON, FL 33432		Name Street Address (P.O. Box Number is Not Acceptable) 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. I am familiar with, and accept the obligations of registered agent.																							
SIGNATURE _____ (NOTE: Registered Agent's signature required when registering) DATE _____																							
FILE NOW! FEE IS \$150.00 And May 1, 2003 Fee will be \$550.00 Amended UBR is \$81.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																					
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																					
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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)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																							
SIGNATURE: <u>Barbara Nohrenburg Linck</u>		Date: <u>9/18/03</u>																					

Amended

☐ CHECK HERE IF MAKING CHANGES

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JK 9/18