


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2005 8:00 am
Secretary of State

03-01-2005 90071 010 ***150.00

DOCUMENT # P02000121835	
1. Entity Name BLB PROPERTY MAINTENANCE, INC.	

Principal Place of Business 240 CRANDON BLVD., SUITE 167 KEY BISCAYNE, FL 33149	Mailing Address 2730 SW 3 AVE MIAMI, FL 33129
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2. Principal Place of Business 2730 SW 3 Ave	3. Mailing Address
Suite, Apt. #, etc. 600	Suite, Apt. #, etc.
City & State MIAMI, FL	City & State
Zip 33129	Country USA



01052005 Chg-P CR2E034 (10/03)

4. FEI Number 90-0054766	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MENENDEZ, ANTONIO R 150 WEST FLAGLER STREET SUITE 2200, MUSEUM TOWER MIAMI, FL 33130
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7. Name and Address of New Registered Agent Name WILFREDO BORROTO Street Address (P.O. Box Number is Not Acceptable) 2730 SW 3 Ave #600 City MIAMI FL Zip Code 33129

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 of registered agent and title if applicable.	WILFREDO BORROTO (NOTE: Registered Agent signature required when reappointing)	DATE 1/5/5
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORROTO, WILFREDO <input type="checkbox"/> Delete 240 CRANDON BLVD., SUITE 167 KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORROTO, MARILYN <input type="checkbox"/> Delete 240 CRANDON BLVD., SUITE 167 KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUZARRAGA, MONICA <input type="checkbox"/> Delete 240 CRANDON BLVD., SUITE 167 KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUZARRAGA, JORGE <input type="checkbox"/> Delete 240 CRANDON BLVD., SUITE 167 KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2730 SW 3 Ave #600 MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2730 SW 3 Ave #600 MIAMI, FL 33129
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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"/> Change <input type="checkbox"/> Addition

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	MONICA LUZARRAGA Date 1/5/5 Daytime Phone # (305) 958-0567
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