2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNOAL REPORT							F 11	Fran 922	
DOCUMENT # P0300008854 1. Entity Name BLANCO MOTORS, INC.					O7 MAY -1 PM 3: 18 SECTION OF STATE TALLAHASSEE, FLORIDA				
Principal Place	e of Business	Mailing Address				IALL	9HASSI	- 6, -3 11	IJΕ
7236 NARCO		17421 COLONIAL DRIVE				- 1002	-c , $rLOR$	≀ID∆	
ORLANDO, FI		ORLANDO, FL 32820							
ONDINDO, TE SECE									
						86 10 11 12 13 13 13 13 13 13		III IDII AKI III	(82 186
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address 17421 E. Colonial Dr.							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			9	Oh = 0	CDOE	24 (42(06)	
		Orlando, FL.			04262007	Chg-P	CRZEU	34 (12/06)	
City & State		Orlando, FL.			4. FEI Numbe				plied For t Applicable
Zip	Country	Zip	Country					\$8.75 Add	
•		32820	<u>U54</u>	4		of Status Desired		Fee Required	
	6. Name and Address of Current	Registered Agent		ame	7. Name and	Address of New R	egistered A	Agent	
		-	•						
	IS, THOMAS C H BORADWAY AVENUE		St	Street Address (P.O. Box Number is Not Acceptable)					
BARTOW,			Sitest Address (1.0. Dox Number is Not Adjeptable)						
DAILTOW,	1 2 3 3 3 3 3		[
			Ci	ity		_	FL	Zip Code	•
. The characterist				((:		the in the Store of Flo		familiar with	
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.									
Thomas a soundard									
SIGNATURE									
Signature, typeo or printed name or registered agent and true ii approable. (איט וכ אפיין steried Agent signature required when remstating). אוני איני איני איני איני איני איני איני									
9. Election Campaign Financing \$5.00 May Be Amended AR Is \$61.25 Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND		11.		ADDITIONS/	CHANGES TO OFF	CERS AND		
TITLE	D STANDER	☐ Delete	TITLE	ĺ	20	101096	, קביו	Change	Addition
NAME	BLANCO, ALEXANDER 17421 E COLONIAL DR		NAME STREET AD	onree.	05/23	9 <mark>0103</mark> 0 1/0701017	nn4	**B1.2)s
STREET ADDRESS CITY+ST-ZIP	ORLANDO, FL 32820		CITY-ST-Z						
	D D		TITLE					Change	Addition
TITLE NAME	MOLINA, ANTONIA	☐ Delete	NAME	D W	olina, A	fN+avia"		LE Change	L ADDITION
STREET ADDRESS	426 MILTON CIR		STREET AD	IDRESS 11	210 14/	ilton cu	۲.		
CITY-ST-ZIP	SANFORD, FL 32773		CITY-ST-Z	ZIP Z	antord.	intonia ilton cir FL 32	173		
TITLE	MD	☐ Delete	TITLE		,			Change	Addition
NAME	QUINTANA, HOMAR	□ Delete	NAME	'''' Q	uintanc	icesie	1/10	χm ei ση	iden
~STREET ADDRESS	-1015 CUTOFF BRANCH		STREET AD	ORESS-	tale Wi	Itan cir.	Cho	ัก	äme)
CITY-ST-ZIP	OVIEDO, FL 32765		CITY-ST-Z	ZIP	Sanfor	d,FL.3	2773		
TITLE	MD	☐ Delete	TITLE	MD	Distair	a, Chris	ticon	☐ Change	Addition
NAME	QUINTANA, ANGEL		NAME	. $^{\prime}$	2011120	Iton cir	1100		ļ
STREET ADDRESS	1120 CASTLEWOOD TERR APT	7. 112	STREET AD		ואף באל				Ì
CITY-ST-ZIP	CASSELBERRY, FL 32707	***	CITY-ST-Z	^{ZIP} 5	<u>antord</u>	1, FL 30	<u> 1773</u>		
TITLE	MD	☐ Delete	TITLE					Change	Addition
NAMÉ	YERO, LESLIE		NAME						
STREET ADDRESS CITY-ST-ZIP	426 WILTON CIR. SANFORD, FL 32773		STREET AD						
	SANFORD, FE 32773	Delete	TITLE	-				☐ Change	Addition
TITLE NAME	1	□ Delete	NAME						
STREET ADDRESS	İ		STREET AD	DDRESS					
CITY-ST-ZIP			CITY-ST-7						Į
12 I hereby	certify that the information supplied with	this filing does not qualify for	the exemp	tions contained	in Chapter 119	9, Florida Statutes I	further cer	tify that the in	nformation
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 emplowered 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.									
11 , 100 dos Bloom 4121, 107 1107 5102-2081									
SIGNATURE: Alexander Blanco 4/26/07 407-568-2/86 SIGNATURE AND TYPED OR PRINTED NAME OF EXCHING OFFICER OR DIRECTOR Date Date Dayline Proof #									
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