## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025201

Entity Name: BLESSED INNOVATIONS, INC.

FILED Apr 28, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1931 NW 129 TERR 3285 FOXCROFT RD MIAMI, FL 33167 #204

MIRAMAR, FL 33025 US

**Current Mailing Address: New Mailing Address:** 

POB 173826 3285 FOXCROFT RD

HIALEAH, FL 33017 #204

MIRAMAR, FL 33025 US

FEI Number: 56-2322311 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MITCHELL, TRACY MITCHELL, TRACY OWNER 3285 FOXÉROFT RD POB 173826 HIALEAH, FL 33017 US #204

MIRAMAR, FL 33025 US

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: TRACY MITCHELL 04/28/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

MITCHELL, TRACY MITCHELL, TRACY Name: Name: 1931 NW 129 TERRACE Address: 3285 FOXCROFT RD #204 Address: City-St-Zip: MIAMI, FL 33167 City-St-Zip: MIRAMAR, FL 33025

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Ρ SIGNATURE: TRACY MITCHELL 04/28/2005