

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000055610
1. Entity Name
PREMIUM BLEND CONSULTING CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3365 W POINT DR		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State COOPER CITY, FL		City & State	
Zip 33026	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2671441		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent		
	Name MARCIO CARDOSO		
	Street Address (P.O. Box Number is Not Acceptable) 3365 W POINT DR		
	City COOPER CITY	FL	Zip Code 33026

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 Marcio Cardoso **MARCIO CARDOSO, PRESIDENT** **1/12/2006**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARDOSO, MARCIO 3365 W POINT DR COOPER CITY, FL 33026	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000000467254 03/23/06-80030-014 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARDOSO, MARICELA 3365 W POINT DR COOPER CITY, FL 33026	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Marcio Cardoso **MARCIO CARDOSO, PRESIDENT** **1/12/2006** **(954) 274-9517**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**