## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000103260

Entity Name: BLINK OF GAINESVILLE INC

FILED Apr 28, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6329-I NEWBERRY RD A3B			6675 NEWBERRY RO J9	6675 NEWBERRY ROAD	
GAINESVILLE, FL 32605				GAINESVILLE, FL 32605	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ETT STREET , FL 32725				
FEI Number:	20-0397060	FEI Number Applied For ( ) FEI	Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
608 EVERÎ	RICHARD ETT STREET , FL 32725	US			
	named entity s e of Florida.	ubmits this statement for the purpos	se of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Agent		Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MOSSERI, RICH 608 EVERETT S DELTONA, FL 3	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () MOSSERI, YAR 608 EVERETT S DELTONA, FL	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () MOSSERI, MICH 608 EVERETT S DELTONA, FL (	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () MOSSERI, ALIO 608 EVERETT S DELTONA, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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

SIGNATURE: RICHARD MOSSERI PRES 04/28/2007