

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091378

FILED
Apr 26, 2005
Secretary of State

Entity Name: BLANC DU BLANC CORPORATION

Current Principal Place of Business:

2089 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

2089 N. UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 20-1106250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLERN, ELIANA
7195 NW 110 AVE.
PARKLAND, FL 330763811 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLERN, ELIANA
Address: 7195 NW 110 AVE
City-St-Zip: PARKLAND, FL 330763811

Title: S () Delete
Name: ELLERN, JOSHUA A
Address: 7195 NW 110 AVE
City-St-Zip: PARKLAND, FL 330763811

Title: V () Delete
Name: WINKOWSKI, LYNDIA
Address: 10862 CYPRESS GLEN DRIVE
City-St-Zip: CORAL SPRINGS, FL 330713811

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: WINKOWSKI, HENRY S
Address: 10862 CYPRESS GLEN DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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.

SIGNATURE: LYNDIA WINKOWSKI

VP

04/26/2005

Electronic Signature of Signing Officer or Director

Date