## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000091378

Entity Name: BLANC DU BLANC CORPORATION

FILED Oct 13, 2006 Secretary of State

Entity Na	Me: BLANCI	DU BLANC CORPORATION				
Current Principal Place of Business:			New Principal	New Principal Place of Business:		
	NIVERSITY DI PRINGS, FL 3					
Current Mailing Address:			New Mailing A	New Mailing Address:		
	NIVERSITY DI PRINGS, FL 3					
FEI Number	: 20-1106250	FEI Number Applied For()	FEI Number Not Applicable	e ( ) Certificate of Status Desired ( )		
Name and	Address of	Current Registered Agent:	Name and Ado	Name and Address of New Registered Agent:		
ELLERN, ELIANA 7195 NW 110 AVE. PARKLAND, FL 330763811 US			2875 NE 191ST 304	STOK & ASSOCIATES 2875 NE 191ST STREET 304 AVENTURA, FL 33180 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its re	gistered office or registered agent, or both,		
SIGNATURE: ROBERT A. STOK				10/13/2006		
	Electro	nic Signature of Registered Age	ent	Date		
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CI	HANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P ( ELLERN, ELIA 7195 NW 110 PARKLAND, F	AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	S ( ELLERN, JOSI 7195 NW 110 PARKLAND, F	AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	WINKOWSKI, 10862 CYPRE	) Delete LYNDA SS GLEN DRIVE IGS, FL 330713811	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name:	T ( WINKOWSKI.	) Delete HENRY S	Title: Name:	( ) Change ( ) Addition		

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

Address:

City-St-Zip:

SIGNATURE: ELIANA ELLERN P 10/13/2006

10862 CYPRESS GLEN DRIVE

CORAL SPRINGS, FL 33071

Address:

City-St-Zip: