## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000117180

Entity Name: BLAST BEVERAGE COMPANY

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
3400 CORA MIAMI, FL	AL WAY STE ( 331453070	600			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
10828 SW 9 MIAMI, FL					
FEI Number:	20-1484973	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:					
•	AL WAY 331453070 U		ance of changing its registance	and office or registered egent or both	
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.					
SIGNATUR		is Oissature of Denistrand Assat		Dete	
		c Signature of Registered Agent		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MILLER, ALFRE 3400 CORAL W MIAMI, FL 3314	AY, SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	COOD () MILLER, JASON 3400 CORAL W MIAMI, FL 3314	AY, SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () MAXWELL, RUE 3400 CORAL W MIAMI, FL 3314	AY SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () PITTMAN, JOSE 3400 CORAL W MIAMI, FL 3314	AY SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CFOS () STUCKER, GILL 3400 CORAL W MIAMI, FL 3314	AY SUITE 600	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () STUCKER, GILL 3400 CORAL W MIAMI, FL 3314	AY SUITE 600	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: ALFRED L. MILLER PD 04/30/2008