


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000145956 1. Entity Name BLAZIN' ENTERTAINMENT, INC.	
--	---

Principal Place of Business 15020 S.W. 113 CT. MIAMI, FL 33176	Mailing Address 15020 S.W. 113 CT. MIAMI, FL 33176
--	--

DO NOT WRITE IN THIS SPACE

03152008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1809577	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000928061 05/20/08-80051-011 150.00
---	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HARDY, SHARAE 15020 S.W. 113 CT. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, ZENDAL R 15020 S.W. 113 CT. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COLE, DELTHINA 15020 S.W. 113 CT. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARDY, SHARAE 15020 S.W. 113 CT. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYLES, DARRYL 15020 S.W. 113 CT. MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Zendal R. Brown* **4/25/08** **(305) 910-4193**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #