

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90058 020 ***150.00

DOCUMENT # P05000012057	
1. Entity Name MAIZENBLUE ENTERPRISES, INC.	

Principal Place of Business % CAPITAL PROPERTIES & SERVICES, INC. 4956 TAMiami TRAIL SOUTH SARASOTA, FL 34231	Mailing Address % CAPITAL PROPERTIES & SERVICES, INC. 4956 TAMiami TRAIL SOUTH SARASOTA, FL 34231
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address 15537 E. CACTUS DR.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State FOUNTAIN HILLS, AZ.	
Zip	Country	Zip 85268	Country USA

9000000



03102007 Chg-P CR2E034 (12/06)

4. FEI Number 20-2226189	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BARBER, GEORGE % CAPITAL PROPERTIES & SERVICES, INC. 4956 TAMiami TRAIL SOUTH SARASOTA, FL 34231	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOUSLEY, MICHAEL J	NAME	15537 E. CACTUS DR.
STREET ADDRESS	4956 TAMiami TRAIL SOUTH	STREET ADDRESS	FOUNTAIN HILLS, AZ. 85268
CITY-ST-ZIP	SARASOTA, FL 34231	CITY-ST-ZIP	FOUNTAIN HILLS, AZ. 85268
TITLE	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOUSLEY, MARTHA M	NAME	15537 E. CACTUS DR.
STREET ADDRESS	4956 TAMiami TRAIL SOUTH	STREET ADDRESS	FOUNTAIN HILLS, AZ. 85268
CITY-ST-ZIP	SARASOTA, FL 34231	CITY-ST-ZIP	FOUNTAIN HILLS, AZ. 85268
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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:  **3-15-07 480-836-4284**