2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028416

Entity Name: BLOSSOM REALTY CORP.

FILED Apr 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8181 NW 36TH STREET

SUITE 14-E

DORAL, FL 33166

New Mailing Address:

8181 NW 36TH STREET SUITE 14-E

Current Mailing Address:

DORAL, FL 33166

FEI Number Applied For ()

11870 S.W. 189TH STREET MIAMI, FL 33177

11870 S.W. 189TH STREET

MIAMI, FL 33177

FEI Number: 20-4400817 FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VAZQUEZ, LAURA 8181 NW 36TH STREET

SUITE 14-E

DORAL, FL 33166 US

VAZQUEZ, LAURA 11870 S.W. 189TH STREET MIAMI, FL 33177

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: LAURA VAZQUEZ

04/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete VAZQUEZ, LAURA Name:

8181 NW 36TH STREET #14-E Address:

City-St-Zip: DORAL, FL 33166

Title: () Delete Name:

Address:

City-St-Zip:

Title: () Delete

Name: Address

City-St-Zip:

Title: () Delete

Name:

SIGNATURE: LAURA VAZQUEZ

Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change () Addition

VAZQUEZ, LAURA Name:

11870 S.W. 189TH STREET Address:

City-St-Zip: MIAMI, FL 33177

Title: PRES () Change (X) Addition

Name: VAZQUEZ, LAURA

11870 S.W. 189TH STREET Address:

MIAMI, FL 33177 City-St-Zip:

Title: () Change (X) Addition TRFA

VAZQUEZ, LAURA Name:

11870 S.W. 189TH STREET Address:

City-St-Zip: MIAMI, FL 33177

Title: SEC () Change (X) Addition

VAZQUEZ, LAURA Name:

Address: 11870 S.W. 189TH STREET

PRES

City-St-Zip: MIAMI, FL 33177

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.

Electronic Signature of Signing Officer or Director

04/20/2007 Date