

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000090515

FILED  
Jan 12, 2009  
Secretary of State

Entity Name: BLUE PRINT FOUNDATION CORP

## Current Principal Place of Business:

20631 NW 2ND CT  
MIAMI, FL 33169

## New Principal Place of Business:

## Current Mailing Address:

20631 NW 2ND CT  
MIAMI, FL 33169

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRACEY, JAHMELL  
20631 NW 2ND CT  
MIAMI, FL 33169 US

## Name and Address of New Registered Agent:

HAYE, ADASSA  
20631 NW 2ND CT  
MIAMI, FL 33169 US

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: ADASSA HAYE

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TRACEY, JAHMEL  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

Title: V ( ) Delete  
Name: HAYE, ADASSA  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

Title: S (X) Delete  
Name: TRACEY, MAXINE  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

Title: T (X) Delete  
Name: TRACEY, NICHOLAS  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HAYE, ADASSA  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

Title: T,S (X) Change ( ) Addition  
Name: HAYE, ADASSA  
Address: 20631 NW 2ND CT  
City-St-Zip: MIAMI, FL 33169

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ADASSA HAYE

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date