

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000003309 (0)**

1. Corporation Name

BLASSER BROTHERS INC., NORTH AMERICA



Principal Place of Business

**7210 NW 77TH ST.
MIAMI FL 33152
US**

Mailing Address

**P. O. BOX 527561
MIAMI FL 33152-7561
US**

3. Date Incorporated or Qualified
01/14/1993

3a. Date of Last Report
01/24/1995

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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25

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9. Name and Address of Current Registered Agent

4. FET Number
65-0393614

Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.06(1) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME	PD	☐ DELETE
12.2 NAME	BLASSER, EDUARDO	
12.3 STREET ADDRESS	251 CRANDON BLVD., APT. 207	
12.4 CITY, ST, ZIP	KEY BISCAYNE FL	
12.5 NAME	V	☐ DELETE
12.6 NAME	BLASSER, PATRICIA	
12.7 STREET ADDRESS	251 CRANDON BLVD., APT. 207	
12.8 CITY, ST, ZIP	KEY BISCAYNE FL	
12.9 NAME		☐ DELETE
12.10 NAME		
12.11 STREET ADDRESS		
12.12 CITY, ST, ZIP		
12.13 NAME		☐ DELETE
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY, ST, ZIP		
12.17 NAME		☐ DELETE
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	President	☒ Change ☐ Addition
13.2 NAME	Blasser Eduardo	
13.3 STREET ADDRESS	1210 NW 77th Street	
13.4 CITY, ST, ZIP	Miami Florida 33166	
13.5 TITLE	V.	☒ Change ☐ Addition
13.6 NAME	Blasser Patricia	
13.7 STREET ADDRESS	1210 NW 77th Street	
13.8 CITY, ST, ZIP	Miami Florida 33166	
13.9 TITLE		☐ Change ☐ Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY, ST, ZIP		
13.13 TITLE		☐ Change ☐ Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY, ST, ZIP		
13.17 TITLE		☐ Change ☐ Addition
13.18 NAME		
13.19 STREET ADDRESS		
13.20 CITY, ST, ZIP		

14. I hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attached sheet with an address.

SIGNATURE:

Patricia Blasser
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96
DATE

305-888-6887
TELEPHONE

CR2E034 (12/95)