## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000073378 (0)

BUSINESS BLOCKS, INC.

City & State

23

24

Zip

CITY-ST-ZIP

Mailing Address Principal Place of Business 9546 N. CITURS SPRINGS BLVD 9546 N. CITRUS SPR. BLVD. CITRUS SPRINGS FL 34434-4026 CITRUS SPRINGS FL 34434 3a. Date of Last Report 3. Date Incorporated or Qualified 10/18/1993 04/29/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-3210770 Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27

City & State

28

Country Country This corporation has liability for intengible tax under s. 199.032, Yes No 29 30 Florida Statutes Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CEPARANO, JOHN 9548 N. CITRUS SPRINGS BLVD.

82 Street Address (P.O. Box Number is Not Acceptable) CITRUS SPRINGS FL 34434 83 84

11. Pursuant to the provisions of Sections 607.0502 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 Stalutes.				
SIGNATURE .	Signature, typed or printed name of registered assert and the if applic	able (NOTE: Ha	eg stered Agent signature r	equired when reinsteting) DAN
12.	OFFICERS AND DIRECTORS	8	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	☐ Change ☐ Additi
NAME	CEPARANO, JOHN		1.2 NAME	
STREET ADDRESS	9546 N. CITRUS SPR. BLVD.		1.3 STREET ADDRESS	
CITY-ST-ZIP	CITRUS SPRINGS FL		1.4 CITY - ST - ZIP	
TITLE	DVP	DELETE	2 1 TITLE	☐ Change ☐ Additi
NAME	CEPARANO, MARY ANN	•	2.2 NAME	
STREET ADDRESS	9546 N. CITRUS SPRINGS BLVD		2.3 STREET ADDRESS	
CITY-ST-ZIP	CITRUS SPRINGS FL		2. 4 C(1Y - \$1 - ZIP	
TITLE		☐ DELETE	3 1 7/1LE	Change Additi
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addit
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-\$1-ZIP			4.4 CITY-ST-ZIP	
TITLE		□ DELETË	5.1 TALE	Change Addit
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		DELETE	6.1 TITLE	Change Addit
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 eath; 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 12 or Block 13 if changed, or on an attachment with an address

6 4 CITY - ST - ZIP

**FILED** 

May 01 1997 8:00am

Secretary of State

6. Election Campaign Financing

Trust Fund Contribution

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable