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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000025551 (0)

BLB CRAFTS, INC.

FILED Mar 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7289 79TH STREET NORTH 7289 79TH STREET NORTH PINELLAS PARK FL 34665-3728 PINELLAS PARK FL 34665-3728 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/01/1994 2. Principal Place of Business Applied For 2a. Mailing Address 4. FEI Number 59-3238078 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 City & State City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip X Yes Personal Property Tax due June 30. 25 29 30 24 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name MCFARLAND, JOSEPH D ESQUIRE 520 SECOND AVENUE SOUTH Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33701 В3 84 City Zip Code 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 Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition DPS 1.1 TITLE TITLE **DOLNEY, LEONARD J** 1.2 NAME NAME 7289 79TH ST. NORTH 1.3 STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition **VPT** 21 TITLE TITLE **NORMAN R. DOLNEY** 2.2 NAME 7289 - 79TH ST. NORTH 23 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL 2 4 City-St-ZIP Change Addition TITLE DELETE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ DELETÉ 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I 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 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 12 or Block 13 if changed, or on an attachment with an address.

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