FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000063194 (1)**

1. Corporation Name

BLADELI INC.

Principal Place of Business	Mailing Address
~~407 LINCOLN ROAD~~	~~407 LINCOLN ROAD~~
~~SUITE 5-B~~	~~SUITE 5-B~~
~~MIAMI BEACH FL 33139~~	~~MIAMI BEACH FL 33139~~

3. Date Incorporated or Qualified: 08/16/1995
3a. Date of Last Report:

2. Principal Place of Business
21 5201 N.W. Geneva Way
Suite, Apt. #, etc.
22 Bldg.15 # 110
City & State
23 Miami Fl, 33166
Zip 24 33166 Country 25 USA

2a. Mailing Address
26 5201 N.W. Geneva Way
Suite, Apt. #, etc.
27 Bldg 15 # 110
City & State
28 Miami Fl, 33166
Zip 29 33166 Country 30 USA

4. FEI Number: 65-0603222 ☐ 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 Applied

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

9. Name and Address of Current Registered Agent

~~BRITO, LUIS G~~
~~407 LINCOLN ROAD~~
~~SUITE 5-B~~
~~MIAMI BEACH FL 33139~~

10. Name and Address of New Registered Agent

81 Name: BALCAZAR, BLANCA A.
82 Street Address (P.O. Box Number is Not Acceptable): 5201 N.W. Geneva Way
83 Bldg. 15 # 110
84 City: Miami FL 85 Zip Code: 33166

11. Pursuant to the provisions of Section 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] President DATE: 5.27.96

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	BALCAZA, BLANCA A	
STREET ADDRESS	5201 N.W. GENEVA WAY 15 APT. 110	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05.27.96 DATE

$97.00.74 Digital Receipt #

CS 6/18/96

CR2E034 (12/95)