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FILED  
May 01 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000001808 (0)

1. Corporation Name

BLENDED EQUITY SERVICES CORP.

Principal Place of Business

1800 S.E. 17TH STREET  
SUITE 300  
FORT LAUDERDALE FL 33316

Mailing Address

1800 S.E. 17TH STREET  
SUITE 300  
FORT LAUDERDALE FL 33316-1717



2. Principal Place of Business

21 901 SE 17 ST

2a. Mailing Address

26 Same

State, Apt. #, etc.

22 Ste 206

Suite, Apt. #, etc.

27

City & State

23 Ft Lauderdale

City & State

28

Zip

24 33316

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

HATCH, IRA C  
~~1800 S.E. 17TH STREET~~  
~~SUITE 300~~  
FORT LAUDERDALE FL 33316

3. Date Incorporated or Qualified

01/08/1996

3a. Date of Last Report

4. FE Number

65-064114

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

81 Name

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

901 SE 17 ST

83 Ste 206

84 City

FL

85 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 *CCM* Ira C. Hatch

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-97

12. OFFICERS AND DIRECTORS

TITLE V.P. SECY TREAS ☐ DELETE  
NAME DONALD A. MURPHY  
STREET ADDRESS 883 SUNSET DR. # 606  
CITY-ST-ZIP FT. LAUDERDALE, FL 33301

TITLE PRES. ☐ DELETE  
NAME JOHN A. PARKS JR.  
STREET ADDRESS 883 SUNSET DR. # 408  
CITY-ST-ZIP FT. LAUDERDALE, FL 33301

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

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 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*JOHN A. PARKS JR.*  
JOHN A. PARKS JR. PRES.

4/22/97 954 224 5950

Date

Daytime Phone #

CR2E034 (9/96)