2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 07, 2005 08:00 AM Secretary of State DOCUMENT # P96000072324 1. Entity Name BLENDEDIN, INC. Principal Place of Business Mailing Address 4600 124TH ST. W. PO BOX 249 CORTEZ, FL 34215 CORTEZ, FL 34215 US 06302005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0693005 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BELL, DOUGLAS** DO NOT WRITE 8708 50TH AVE W BRADENTON, FL 34210 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 7, 2005 Trust Fund Contribution, Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE BELL, WALTER T NAME 4600 124TH ST W STREET ADDRESS CITY - ST - ZIP CORTEZ, FL TITLE BELL, CALVIN E NAME 12203 45TH AVE W STREET ADDRESS CITY - ST - ZIP CORTEZ, FL TITLE NAME BELL, C DOUGLAS 8708 50TH AVE W STREET ADDRESS DO NOT WRITE CITY-ST-ZIP BRADENTON, FL TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TIRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED