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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P96000097481

BLC COMMERCIAL CAPITAL CORP.

Principal Place	of Business	Mailing Address				
C/O FRED CRISPEN		C/O FRED CRISPEN				
415 BECKRICH RD., #250 PANAMA BEACH FL 32407		415 BECKRICH RD #250 PANAMA BEACH FL 32407		DO NOT WRI	DO NOT WRITE IN THIS SPACE	
FRIMMA BEACH IE 3240/		I MINIMA DENGIT I'E SETO		3. Date Incorporated or Qualifed	3. Date Incorporated or Qualifed	
				12/03/1996		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		58-2319663	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	Trust Fund Contribution		
	25	29 30		This corporation owes the curr Personal Property Tax.	ent year intangible ☐ Yes ②No	
24	9. Name and Address of Current			10. Name and Address of New !		
5. Name and Address of Outline Registered Agent				10 11 0 0		
CRISPEN, FRED				United Corporation		
415 BECKRICH ROAD #250			82 Street	Address (P.O. Box Number is Not Asept	and Blud	
PANAMA BEACH FL 32407			83			
				Stc. 508		
			84 City	Misama	FL 85 Zip Code 33156	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation s				corporation submits this statement for the	nurpose of changing its registered	
office or registered agent, or both, in the State of Floridas Statutes, the above-tained corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the oblightness of the obligations						
_		Diec	(2027)	on non ata Services	Dr. 1/29/99	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent signature i		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12	
TITLE	0	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	SKUBICKI, MARK	•	1.2 NAME			
STREET ADDRESS	10 BANK STREET		1.3 STREET ADDRESS	}		
CITY-ST-ZIP	WHITE PLAINS NY 10606		1.4 CITY-ST-ZIP			
TITLE	P.	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	TANNENBAUSER, ROBERT F		2.2 NAME			
STREET ADDRESS	919 THIRD AVE, 17TH FL		2.3 STREET ADDRESS	645 Madison Avenue		
CITY-\$T-ZIP	NEW YORK NY		2.4 CITY-ST-ZIP	NEW YORK NY 1002	L DANGER	
TITLE	VP	☐ DELETE	3.1 TITLE	Treasurer .	Change Addition	
NAME	NAPIER, JENNIFER		32 NAME	Goldstein, Jennikur 645 madison Avence	. }.	
STREET ADDRESS	919 THIRD AVE, 17TH FL		3.3 STREET ADDRESS	• -		
CITY-ST-ZIP	NEW YORK NY	- DELETE	3.4. CITY-ST-ZIP	N7, NY 10022	Change Addition	
TITLE	S SAME	☐ DELETE	4.1 TITLE		Za Change Zacuton	
NAME	REDLENER, DAVID		4. 2 NAME	645 madison Accime		
STREET ADDRESS	919 THIRD AVE, 17TH FL		4.3 STREET ADDRESS	1		
CITY-ST-ZIP	NEW YORK NY	☐ DELETE	4.4 CITY-ST-ZIP	NY, NY 10022	Change Addition	
TITLE		☐ netele	5.1 TITLE 5.2 NAME		C. Criange C. Addition	
NAME			1	İ	•	
STREET ADDRESS			5.3 STREET ADDRESS		1	
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
TITLE			6.2 NAME		C Symmy C 1 Walletin	
NAME			6.3 STREET ADDRESS		-	

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

J. GOLDSTEN

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90037 036 ***150.00

127194 212-251-3626