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

PROFIT CORPORATION **ANNUAL REPORT**

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

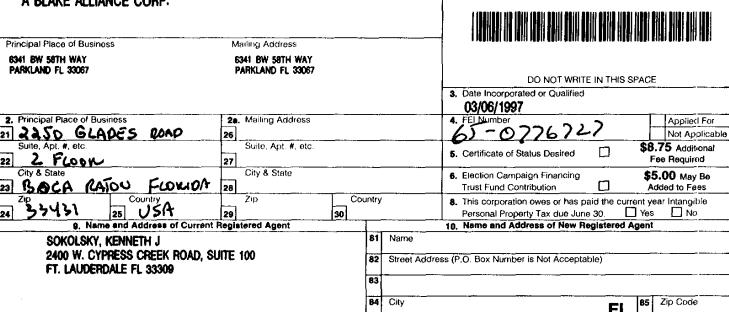
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000021555 (2)

A BLAKE ALLIANCE CORP.

Principal Place of Business Mailing Address 6341 BW 58TH WAY 6341 BW 58TH WAY PARKLAND FL 33067 PARKLAND FL 33067

FILED Mar 26 1998 8:00am Secretary of State



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 heard of directors. I hereby accept the appointment as registered

	Signature, typed or printed name of registered agent and little if appl		- Registered Agent signature requi		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	DELETE	1.1 TITLE	-Girange	Addition Addition
NAME	BLAKE, STACEY J		1.2 NAME		
STREET ADDRESS	6341 BW 58TH WAY		1.3 STREET ADDRESS		
CITY - ST - ZIP	PARKLAND FL 33087		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE	☐ Change	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	☐ Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change	☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. Thereby certify that the information supplied with the tiling 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 similar legister of the corporation or the receipt or trute and decurate 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 receipt or trutede emporator to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attackment with an address.

SIGNATURE: