

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90036 034 \*\*\*150.00

**DOCUMENT # P97000045603**

1. Entity Name  
**BLUELINE MECHANICAL, INC.**



Principal Place of Business  
**13757 49TH ST. N, 7A  
CLEARWATER, FL 33762**

Mailing Address  
**13757 49TH ST. N, 7A  
CLEARWATER, FL 33762**

**24032667**



03122004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

**4611 107th Circle N.**

3. Mailing Address

**4611 107th Circle N.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Clearwater, FL**

City & State

**Clearwater, FL**

Zip

**33762**

Country

**USA**

Zip

**33762**

Country

**USA**

4. FEI Number

**59-3447851**

Applied For

Not Applied

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**PANARO, STEPHEN L  
12895 110TH AVE N  
LARGO, FL 33774**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME PANARO, STEPHEN L  
STREET ADDRESS 12895 110TH AVE N  
CITY-ST-ZIP LARGO, FL 33774 ☐ Delete

TITLE VD  
NAME MILLER, CHARLES T  
STREET ADDRESS 1923 BOW CT  
CITY-ST-ZIP VALRICO, FL 33594 ☐ Delete

TITLE STD  
NAME PANARO, ANGELA C  
STREET ADDRESS 12895 110TH AVE N  
CITY-ST-ZIP LARGO, FL 33774 ☐ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Ad  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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, changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

*Stephen L. Panaro*