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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000093829 (4)

BLANCO COURIER, INC.

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				I EEDEKOOR IIN TOON BOOK BOKAN OONIN OONIN	OTOD THE THIR TIME INV 1001		
8601 SW 41 TERRACE MIAMI FL 33155		8601 SW 41 TERRACE MIAMI FL 33155					
Marine 1 L 43133		MINMI IL 30133		DO NOT WRITE IN THIS SPACE			
					 Date Incorporated or Qualified 11/03/1997 		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0799970	Not Applicable		
Suite, Apt. #, etc.		Suite Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State [28]		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Countr	У	8. This corporation owes or has paid the c	urrent year Intangible	
24	25 29 30		30		Personal Property Tax due June 30.		
9, Name and Address of Current Registered Agent				1	10. Name and Address of New Registere	d Agent	
BLANCO, ALEXIS			81	Name			
8601 SW 41 TERRACE			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
l Mir	MI FL 33155		83	<u> </u>			
			"	1			
			84	City	F:	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the above	re-named cor	poration 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
*	The state of the s	property of the control of the control of the	Contra Cibilot			-	
SIGNATURE	Signature, typed or product name of hope level as	post and fille if applicable (NO	It: Registered Ap	ent signature requ	ired when reinstating) DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF		
TITLE	PTSD	☐ DELETE	1.1 TITLE			Change Addition	
NAME	BLANCO, ALEXIS		1.2 NAME	ŀ			
STREET ADDRESS	8601 SW 41 TERRACE MIAMI FL 33155			T ADDRESS		İ	
CITY-ST-ZIP TITLE			1.4 CiTY- 21 TITLE	SI-ZIP		Change Addition	
NAME	OLANOS ADDIAN		2.2 NAME			J. S. Marie	
STREET ADDRESS	8601 SW 41 TERRACE			T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155		2. 4 CITY				
TIFLE		DELETE	3.1 TITLE			Change Addition	
NAME			32 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAM)	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	5 1 TITLE			Change Addition	
TITLE		□ been				C cuange C Modition	
NAME CTREET ADDRESS			5 2 NAME	1		\	
STREET ADDRESS			5.4 CITY-	T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	31 - EIF		Change Addition	
NAME			6.2 NAME				
STREET ADDRESS				1 ADDRESS		}	
CITY-ST-ZIP			6 4 CITY	- 1			
,					0 110 07(0)(1) 51 11 0 1(

Thereby 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 informatic 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 eath; 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 13 if changed, or on an attachment with an address

868-4022