

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000058008	
1. Entity Name J. BLANCO & ASSOCIATES, INC.	

Principal Place of Business
**18080 NW 60 CT.
 HIALEAH, FL 33015**

Mailing Address
**PO BOX 171337
 215
 HIALEAH, FL 33015**

DO NOT WRITE IN THIS SPACE

04202005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0847571	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BLANCO, JULIO A
 18080 NW 60TH CT.
 HIALEAH, FL 33015**

**DO NOT WRITE
 IN THIS SPACE**

7. 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 reappointing)

DATE

**FILE NOW!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

8. Election Campaign Financing
 Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BLANCO-VAZQUEZ, JULIO A 18080 NW 60TH CT. HIALEAH, FL 33015
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD BLANCO, MARY E 18080 NW 60TH CT. HIALEAH, FL 33015
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 04/22/05-80045-002 150.00

**DO NOT WRITE
 IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF ISSUING OFFICER OR DIRECTOR

April 19, 2005 3054
 822-0608