

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

0576424 AT

DOCUMENT # P99000043820

1. Entity Name
BLANCO AYAZO INVESTMENTS, INC.

03-25-2002 90064 042 ***150.00

Principal Place of Business
2343 PASADENA WAY
WESTON FL 33327

Mailing Address
551 WEST BAY DR
LONG BEACH NY 11561



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
797 CHIMNEY ROCK RD

3. Mailing Address
 Suite, Apt. #, etc.
797 CHIMNEY ROCK RD

City & State
WESTON FL

City & State
WESTON FL

4. FEI Number **65-0983524** **Applied For**
 Not Applicable

Zip **33327** **Country** **USA** **Zip** **33327** **Country** **USA**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

7. Name and Address of New Registered Agent
Name **GAVIDES MARIBEL C.**
Street Address (P.O. Box Number is Not Acceptable)
797 CHIMNEY ROCK RD
City **WESTON FL 33327 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.

SIGNATURE Maribel Gavidos **DATE** 02/20/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME P DASH, PATRICIA J	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 2343 PASADENA WAY	
CITY-ST-ZIP WESTON FL 33327	
TITLE NAME D GAVIDES, MARIBEL C	<input type="checkbox"/> Delete
STREET ADDRESS 797 CHIMNEY ROCK RD.	
CITY-ST-ZIP WESTON FL 33327	
TITLE NAME M BLANCO, GIOVANNA L	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 2343 PASADENA WAY	
CITY-ST-ZIP WESTON FL 33327	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME P GAVIDES MARIBEL C.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 797 CHIMNEY ROCK RD	
CITY-ST-ZIP WESTON FL 33327	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maribel Gavidos **DATE** 02/20/02 **Daytime Phone #** 954-659-8835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR