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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Steam

DIVISION OF CORPORATIONS

DOCUMENT # V41455

(9)

BLEY INCORPORATED

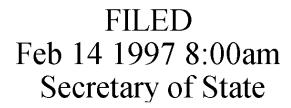
Principal Place of Business

Mailing Address

3409 S. DREXEL AVENUE **TAMPA FL 33629**

SIGNATURE:

3409 S. DREXEL AVENUE TAMPA FL 33629-8807



3a. Date of Last Report

04/17/1996



3. Date incorporated or Qualified

07/01/1992

2. Principa! P	lace of Busine	:	2a. Mailing Address						4. FEI Number			Applied For	7	
21					26					59-3127791			Vot Applicable	,
Suite, Apt.	Suite, Apt. #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired		7	Additional Required	
City & State	e		City & State					十	6. Election Campaign Financing		\$5.0	0 May Be	7	
23		2:	28				Trust Fund Contribution			Added to Fees				
Zıp	Country Zip Cou							ntry 8. This corporation has liability for intangit			intangible	ole tax under s. 199,032,		
24	[3	25	2:	9 30				Florida Statutes X Yes 🔲						
	and Address of	Current Reg	istered	Agent	B1		1	IO. Name and Address of New Re	gistered A	gent				
BLEY, DAVID								Name						
3409 S. DREXEL AVENUE								Street Addr	ess	(P.O. Box Number is Not Acceptal	ole)			-
TAMPA FL 33629								82 Street Address (P.O. Box Number is Not Acceptable)						
					83									
					84 City						05 76	p Code	4	
							"	Oity			FL	85 Zij) C006	
11. Pursuant	ons of Sections	607 0502 and	607.15	08, Florida Statut	bove	-named corp	ora	tion submits this statement for the p	ourpose of	changing	its registered	1		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.														
•			a congulation	0., 500		J J. L.		•						
SIGNATURE	Signature, Typed o	garlia nan e pi nag	stered agent and	itle if appli	cable. (NOT	E: Registere	d Ager	nt signature require	red w	then reinstating)	DATE			1
12.		OFFICI	RS AND DIF	ECTOR	S	13.		,		ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTO	DRS IN 12	78
TITLE	D				☐ DELETE	1.1 (TLE					Change	Addition	
NAME	BLEY, DAV				1.2 N	AME								
STREET ADDRESS	3409 S. D	rexel ave.	13 \$1			TREET /	ADDRESS						8	
CITY - ST - Z(P	TAMPA FL					140	11Y - ST	ZIP						R2F034
TITLE	D				DELETE	2.17						☐ Change	Addition	
NAME	BLEY, SU	San				22 N	AME			•				1
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City-SI-ZiP	TAMPA FL					2.40	HY-S	T-ZIP						
TITLE	,				☐ DELETE	3.1 7	******				· · · · · · · · · · · · · · · · · · ·	Change	Addition	7
NAME						3.2 N	AME	1						
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City - St - ZiP						3.4 (HY-S	T- 7 1P						
TITLE					DELETE	4.1 T		· -:		·······		☐ Change	Addition	7
NAME						4.21	AME					-	•	
STREET ADDRESS						4.3 \$	TREET A	ADDRESS						
CITY - ST - ZIP							ITY-ST							
TITLE					DELETE	5.1 T						Change	Addition	╗
NAMÉ						5.2 N	AME							
STREET ADDRESS								ADDRESS						
CITY+S1-74P						5.4 0	ITY-ST	- 7IP						
TOTLE	1				☐ DELETE	6.1 T			•			Change	Addition	1
NAME						6.2 N	AME					•		
STREET ADDRESS					_	i i		ADDRESS	`					
CITY-SI-ZIP							11Y-S1		/					
14. Ldo herel	by certify that	the information	supplied with	His fili	ng does not quali	ty for the	AYA	notion erated	d in	Section 119.07(3)(i), Florida Statute	s. lurther	certify the	at the	1
informatio	on indicated o	in this annual re lor of the corpo	port or supply ration or the r	eceiver	annual reportis to	rue and	arcu xeci	rate and that use this repor	t my rt as	y signature shall have the same legs s required by Chapter 607, Florida	al effect as Statutes: er	if made und that m	inder oath; tha i name	at
appears	in Block 12 or	Block 13 if cha	nged o on	attac	ent will an ad	iress.	1)		/ / / / / / / / / / / / / / / / / / / /		ir nas +11)	· · · · · · · · · · · · · · · · · · ·	l