


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V56010</b>	
1. Entity Name <b>BLAZIE RESEARCH, INCORPORATED</b>	

Principal Place of Business <b>518 S. BEACH ROAD HOBE SOUND, FL 33455</b>	Mailing Address <b>518 S. BEACH ROAD HOBE SOUND, FL 33455</b>
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**DO NOT WRITE IN THIS SPACE**



03032006 No Chg-F CR2E034 (11/05)

4. FEI Number <b>52-1787873</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BLAZIE, DEANE B  
518 S. BEACH ROAD  
HOBE SOUND, FL 33455**

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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAZIE, DEANE B 518 S. BEACH ROAD HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BLAZIE, LYNN M 518 S. BEACH ROAD HOBE SOUND, FL 33455
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04/18/06-80042-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** Deane B Blazie **3-31-06** **410 3360912**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #