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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 22 PM 3:56

DOCUMENT # **F05088** (2)

1. Corporation Name  
**BLUE WATERS PROPERTIES, INC.**

Principal Place of Business  
**507 CARIBBEAN AVE.  
P.O. BOX 743  
KEY LARGO FL 33037  
US**

Mailing Address  
**P. O. BOX 743  
KEY LARGO FL 33037  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/10/1980** 3a. Date of Last Report **04/20/1994**

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

4. FEI Number **59-2050923** Applied For  
Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**FERNANDEZ, SANTIAGO  
507 CARIBBEAN DRIVE  
KEY LARGO FL 33037**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE **DP**  
NAME **FERNANDEZ, SANTIAGO**  
STREET ADDRESS **507 CARIBBEAN DRIVE**  
CITY-ST-ZIP **KEY LARGO, FL 00000**

TITLE **DST**  
NAME **FERNANDEZ, MIRTA E.**  
STREET ADDRESS **507 CARIBBEAN DRIVE**  
CITY-ST-ZIP **KEY LARGO, FL 00000**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP **33037**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP **33037**

3.1 TITLE  Change  Addition  
3.2 NAME **M SERGIO J GARCIA**  
3.3 STREET ADDRESS **78 MARINA AVE**  
3.4 CITY-ST-ZIP **KEY LARGO, FL 33037**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mirta E Fernandez DST 3/10/95 305-451-0688  
MIRTA E FERNANDEZ