

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003735

FILED
Feb 22, 2010
Secretary of State

Entity Name: BLUE GETAWAYS HOLDING, S.A., INC

Current Principal Place of Business:

AVE.RICARDO J.ALFARO,CENTURY TOWER BUILDIN
G, 19TH FLOOR, SUITE 1918
PANAMA,REP OF PANAMA, OC

New Principal Place of Business:

AVE.RICARDO J.ALFARO,CENTURY TOWER BUILDIN
G, 19TH FLOOR, SUITE 1918
PANAMA,REP OF PANAMA, PA OC

Current Mailing Address:

8320 WEST SUNRISE BLVD. STE 202A
PLANTATION, FL 33322

New Mailing Address:

8320 WEST SUNRISE BLVD. STE 202A
PLANTATION, FL 33322 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMADRID FINANCIAL SERVICES, CORP
8320 WEST SUNRISE BLVD.,STE. 202A
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: MURO IBARRA, ALLAN M
Address: AVE.RICARDO J.ALFARO,CENTURY TOWER BUILDIN
City-St-Zip: PANAMA,REP OF PANAMA, PA OC

Title: S
Name: DALLE VEDOVE, RICCARDO
Address: AVE.RICARDO J.ALFARO,CENTURY TOWER BUILDIN
City-St-Zip: PANAMA,REP OF PANAMA, PA OC

Title: T
Name: MURO IBARRA, YUMIL
Address: AVE.RICARDO J.ALFARO,CENTURY TOWER BUILDIN
City-St-Zip: PANAMA,REP OF PANAMA, PA OC

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ALLAN M MURO IBARRA

P

02/22/2010

Electronic Signature of Signing Officer or Director

_____ Date