

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M17067

FILED  
Feb 08, 2012  
Secretary of State

Entity Name: BLUE BRIDGE CORP.

**Current Principal Place of Business:**

2600 SW 3RD AVE.  
SUITE 800  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 450804  
MIAMI, FL 33245

**New Mailing Address:**

2600 SW 3RD AVE.  
SUITE 800  
MIAMI, FL 33129

FEI Number: 65-0192247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ACEVEDO, RAFAEL A  
2600 SW 3RD AVE.  
SUITE 800  
MIAMI, FL 33129 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MARGHERI, ANA M  
Address: AVE. MITRE 1675, FLORIDA (VTE LOPEZ)  
City-St-Zip: BUENOS AIRES, AR 0000 AR

Title: DT  
Name: MARGHERI, MARTA J  
Address: AVE. MITRE 1675, FLORIDA (VTE LOPEZ)  
City-St-Zip: BUENOS AIRES, AR 0000 AR

Title: S  
Name: ACEVEDO, RAFAEL A  
Address: 2600 SW THIRD AVE, SUITE 800  
City-St-Zip: MIAMI, FL 33129 US

Title: DVP  
Name: MARGHERI, ERNESTO O  
Address: AVE. MITRE 1675, FLORIDA (VTE LOPEZ)  
City-St-Zip: BUENOS AIRES, AR AR

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: RAFAEL A. ACEVEDO

S

02/08/2012

Electronic Signature of Signing Officer or Director

Date