

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107693

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** BLUE BLOOD INVESTMENTS OF FLORIDA, INC.

**Current Principal Place of Business:**

1450 CORAL WAY  
6  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

1450 CORAL WAY  
6  
MIAMI, FL 33145

**New Mailing Address:**

**FEI Number:** 37-1427792      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LANZAFAME, ALFIO  
1450 CORAL WAY  
6  
MIAMI, FL 33145 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:** DPS  
**Name:** LANZAFAME, ALFIO  
**Address:** 335 S. BISCAYNE BLVD 1809  
**City-St-Zip:** MIAMI, FL 33131

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: ALFIO LANZAFAME

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PDS

03/02/2011

\_\_\_\_\_ Date