

**2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F72463

Entity Name

Blue Sapphire, Inc. ✓

**FILED**  
**May 17, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90958 008 \*\*\*150.00

Principal Place of Business

300 W. Flagler St.  
Miami, FL 33135

Mailing Address

2300 W. Flagler St.  
Miami, FL 33135

Principal Place of Business

300 W. Flagler St.  
State, Apt. #, etc.

3. Mailing Address

2300 W. Flagler St.  
State, Apt. #, etc.

City &amp; State

Miami FL

City &amp; State

Miami FL

4. FEI Number

59-2189787

Applied For

Not Applicable

Zip

33135

Country

US

Zip

33135

Country

US

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

6. Name and Address of Current Registered Agent

Fernando M. Soto  
2300 W. Flagler St.  
Miami, FL 33135

7. Name and Address of New Registered Agent

Name: Fernando M. Soto  
Street Address (P.O. Box Number is Not Acceptable):  
2300 W. Flagler St.  
City: Miami FL Zip Code: 33135

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, typed or printed name of registered agent and title if applicable  
Fernando M. Soto - Registered AgentThis corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contributions ☐\$5.00 May Be  
Added to Fees

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS LIST

|                                                                |                                                   |                                                                   |
|----------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------------------|
| PD<br>Soto, Fernando<br>2300 W. Flagler St.<br>Miami, FL 33135 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STD<br>Soto, Sonia<br>2300 W. Flagler St.<br>Miami, FL 33135   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <input type="checkbox"/> Delete                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <input type="checkbox"/> Delete                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Signature, typed or printed name of registered agent and title if applicable  
Fernando M. Soto - President

CR2E034 (9/99)