

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **191873 (9)**  
1. Corporation Name  
**BLUE LAKE DEVELOPMENT CORPORATION**



Principal Place of Business  
**OFFICE  
10001 W. FLAGLER ST.  
MIAMI FL 33174  
US**

Mailing Address  
**PO BOX 650147  
MIAMI FL 33265**

3. Date Incorporated or Qualified **03/24/1956** 3a. Date of Last Report **02/02/1995**

2. Principal Place of Business  
21 State, Apt. #, etc. 26 Mailing Address  
22 City & State 27 State, Apt. #, etc.  
23 Zip 28 City & State  
24 Country 29 Zip 30 Country

4. FEI Number **59-0872606** 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  
**RAPEE, STUART M.  
3620 YACHT CLUB DR #506  
N.MIAMI FL 33180**

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 607.1509, 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 \_\_\_\_\_ DATE \_\_\_\_\_  
SIGNATURE OF REGISTERED AGENT \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RAPEE, BRUCE E	
STREET ADDRESS	9801 W. FLAGLER STREET	
CITY-STATE-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RAPEE, STUART M	
STREET ADDRESS	12903 BANYON RD.	
CITY-STATE-ZIP	N.MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KEMPNER, ELEANOR	
STREET ADDRESS	9801 W. FLAGLER ST.	
CITY-STATE-ZIP	MIAMI FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	IMEL, BONNIE	
STREET ADDRESS	9801 W FLAGLER ST	
CITY-STATE-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RAPEE, LEANNE	
STREET ADDRESS	9801 W FLAGLER ST	
CITY-STATE-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RAPEE, SONYA	
STREET ADDRESS	9801 W FLAGLER ST	
CITY-STATE-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

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 119.07(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: *Bruce Rapee* 1-16-96 305-553-0011  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)