

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006257

FILED
Mar 06, 2007
Secretary of State

Entity Name: AZUR RESORTS (BAHAMAS) LTD. CO.

Current Principal Place of Business:

633 S.E. 3RD AVE STE 203
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

19 WEST STREET NORTH N-3881
NASSAU, BAHAMAS, BA NASSAU BA

Current Mailing Address:

633 S.E. 3RD AVE STE 203
FT. LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 20-5663949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAZO, ALBERT J ESQ
633 S.E. 3RD AVE STE 203
FT. LAUDERDALE, FL 33301 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: CP () Delete
Name: GOREE, DONALD H
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VC () Delete
Name: CHRISTENSEN, JOHN
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D () Delete
Name: SMITH, LEON H
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP (X) Delete
Name: GRENE, JEFF
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: S (X) Delete
Name: TURNQUEST, KENRAH
Address: 19 WEST STREET NORTH N-3881
City-St-Zip: NASSAU, BAHAMAS,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GOREE, DONALD H MR.
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: D (X) Change () Addition
Name: SMITH, LEON H MR.
Address: 633 S.E. 3RD AVE STE 203
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: S (X) Change () Addition
Name: TURNQUEST, KENRAH MS.
Address: 19 WEST STREET NORTH N-3881
City-St-Zip: NASSAU, BAHAMAS, NA NASSAU BA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONALD H. GOREE

P

03/06/2007

Electronic Signature of Signing Officer or Director

_____ Date