2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

FILED Apr 28, 2008 08:00 AN Secretary of State

1. Entity Nam BLUE WA	ATER EXPO, INC.			Secretary of Sta
3 .		Mailing Address 7355 SW 9TH STREET		
***************************				***
VERO BCH, F	FL 32968	VERO BCH, FL 32968		
				A IMPOLITOR PLOT LOUIS BEINDE STADE BEIN DEN BEIN EILBU BEIND BEIND BEIND BEIND BEIND BEINDE FEILEN.
DO NOT WRITE IN THIS SPA			CE	04232008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For
				59-2214057 Not Applicable 5. Certificate of Status Desired \$8.75 Additional
	6 No Add 6 Co A Do	lateral Brand		Fee Required
6. Name and Address of Current Registered Agent				
HAMNER, GEORGE F. JR. 7355 SW 9TH STREET			•	DO NOT WRITE
******************				IN THIS SPACE
VERO BEACH, FL 32968				IN THIS SPACE
			ļ	·
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
	Signature, typed or printed name of registered agent and til	e il applicable. (NOTE: Registers	ed Agent signature required	when reinstating) DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		.00 May Be U00000925122 ed to Fees 05/20/08-80054-002 150.00
10.	· OFFICERS AND DIRI	CTORS		
TITLE NAME	DP HAMNER, GEORGE F JR.		i	
STREET ADDRESS	995 SANDFLY LANE			
CITY-ST-ZIP	VERO BEACH, FL			·
TITLE NAME				
STREET ADDRESS CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·	, , , , ,	
TITLE			1	
NAME STREET ADDRESS			ľ	DO NOT WRITE
CITY-ST-ZIP				DO NOT WRITE
TITLE NAME				IN THIS SPACE
STREET ADDRESS				
CITY-ST-ZIP	1 .		संदक्षा भाग प्रस्तु । इ	المسول يهيا بالمان المتعالم بالمهارية الميانية الميانية والمعارض أنساس فالمعارض الماس والمانيات
TITLE				The might have the first the filter and it was the
NAME STREET ADDRESS			6.6.7.	
CITY-ST-ZIP			A CONTROL OF THE STATE OF THE S	
TILE NAME			- 10 year	The state of the s
NAME STREET ADDRESS			W.	
CITY-ST-ZIP	<u> </u>			Constitution of the second
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				

SIGNING OFFICER OR DIRECTOR