

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J61178

FILED  
Jan 19, 2007  
Secretary of State

Entity Name: BLUE WATER CANVAS & MARINE INTERIORS, INC.

## Current Principal Place of Business:

4 FISHING VILLAGE DR  
OCEAN REEF  
KEY LARGO, FL 33037 US

## New Principal Place of Business:

## Current Mailing Address:

4 FISHING VILLAGE DR  
OCEAN REEF  
KEY LARGO, FL 33037 US

## New Mailing Address:

FEI Number: 59-2770073      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JIMENEZ, NOE DPT  
4 FISHING VILLAGE DR  
OCEAN REEF CLUB  
KEY LARGO, FL 33037 US

## Name and Address of New Registered Agent:

MONTES, JUAN C PRESIDE  
4 FISHING VILLAGE DR  
OCEAN REEF CLUB  
KEY LARGO, FL 33037 US

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: JUAN CARLOS MONTES

01/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: JIMENEZ, NOE MR  
Address: 28635 SW 144 AVE  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: VSD ( ) Delete  
Name: MONTES, JUAN C MR  
Address: 16981 SW 298 ST  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: VSD ( ) Delete  
Name: JIMENEZ, IRMA T MRS  
Address: 28635 SW 144 AVE  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: SECR (X) Delete  
Name: HURTADO, MAYRA L MRS  
Address: 16981 SW 298 ST  
City-St-Zip: HOMESTEAD, FL 33030 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MONTES, JUAN C MR  
Address: 16981 SW 298 ST  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: TREA (X) Change ( ) Addition  
Name: JIMENEZ, IRMA T MRS  
Address: 28635 SW 144 AVE  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: SECR (X) Change ( ) Addition  
Name: HURTADO, MAYRA L MRS  
Address: 16981 SW 298 ST  
City-St-Zip: HOMESTEAD, FL 33030 US

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: IRMA TORRES JIMENEZ

TREA

01/19/2007

Electronic Signature of Signing Officer or Director

Date