2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J61178

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

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4 FISHING VILLAGE DR

OCEAN REEF

KEY LARGO, FL 33037

New Mailing Address: Current Mailing Address:

4 FISHING VILLAGE DR OCEAN REEF

KEY LARGO, FL 33037 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONTES, JUAN C PRESIDE 4 FISHING VILLAGE DR OCEAN REEF CLUB

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

JIMENEZ, NOE PRESIDE

PRFS

TREA

JIMENEZ, NOE

20281 SW 318TH STREET

JIMENEZ, IRMA T MRS

20281 SW 318TH STREET

HOMESTEAD, FL 33033 US

HOMESTEAD, FL 33030 US

in the State of Florida.

SIGNATURE: NOE JIMENEZ 01/18/2008

> Electronic Signature of Registered Agent Date

> > Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

() Change () Addition

Title: PRFS () Delete MONTES, JUAN C MR Name:

16981 SW 298 ST Address:

City-St-Zip: HOMESTEAD, FL 33030 US

TREA Title: () Delete Name: JIMENEZ, IRMA T MRS 28635 SW 144 AVE Address:

HOMESTEAD, FL 33033 US City-St-Zip:

() Delete Title: SECR HURTADO, MAYRA L MRS Name:

16981 SW 298 ST Address: City-St-Zip: HOMESTEAD, FL 33030 US

Title: () Delete Title: () Change (X) Addition

MONTES, JUAN C Name: Name: Address: Address: 16981 SW 298 ST

City-St-Zip: City-St-Zip: HOMESTEAD, FL 33030 US

I hereby certify that the information supplied with this filing does not qualify 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: NOE JIMINEZ **PRES** 01/18/2008

Electronic Signature of Signing Officer or Director

Date