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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K43796 1. Corporation Name

SADU BLUE WATER, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90132 001 ***150.00

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Zip Country Zip Country Zip Country 2	23		}-¬ ·				() = 1 · · · · · · · · · · · · · · · · · ·			
9. Name and Address of Current Registered Agent BEALS, JUSTIN E 30 S.W. 87H STREET. SUITE 2000 MAMM FL 33130 82 62 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Zode 671. Pursi ant to the provisions of Excitoris 807 05 (2 and 607 1508, Florida Statutes, the above-hamed coporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such changes for the design of the appointment as registered office or registered agent, or both, in the State of Florida Such changes for the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such changes for the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such changes for the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such changes for or directors. I hereby accept the at pointment as registered office or registered agent, or both, in the State of Florida Such changes for or directors. I hereby accept the at pointment as registered office or registered agent, or both, in the State of Florida Such changes for or directors. I hereby accept the at pointment as registered office or registered agent, or both, in the State of Florida Such changes for or registered agent or directors. I hereby accept the at pointment as registered differed in the state agent of directors. I hereby accept the at pointment as registered office or registered agent. 12.		Country			ntry)	1621 k.r.
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further cent y 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 with all other like empowered.

SIGNATURE:

LOF SIGNING OFFICER OR DIRECTOR
(APT SALU R. FKZHM