

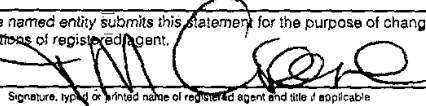
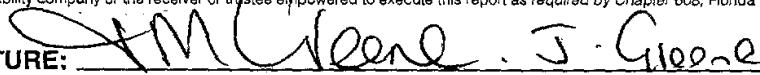


Apr 28
Sec

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L01000004017		
1. Entity Name BLUE LLC		
Principal Place of Business 5604 N. ATLANTIC AVE COCOA BEACH, FL 32931		Mailing Address 5604 N. ATLANTIC AVE COCOA BEACH, FL 32931
DO NOT WRITE IN THIS SPACE		
		 03222005No Chg-LLC CR2E083 (10/03)
4. FEI Number NOT APPLICABLE		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required
5. Name and Address of Current Registered Agent GREENE, JANICE M 5604 N. ATLANTIC AVE COCOA BEACH, FL 32931		DO NOT WRITE IN THIS SPACE
6. 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 <u></u> (NOTE: Registered Agent signature required when re-installing) Filing Fee is \$50.00 Due by May 1, 2005 DATE <u>4/25/05</u>		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENE, MARTIN 5604 N. ATLANTIC AVE COCOA BEACH, FL 32931	DO NOT WRITE IN THIS SPACE L000000339958 04/28/05-80091-017 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENE, JANICE 5604 N. ATLANTIC AVE. COCOA BEACH, FL 32931	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: <u></u> 321-868-7343 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #		