

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90047 024 ****50.00

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04182005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L03000000131 1. Entity Name BLUE INVESTMENT LLC			
Principal Place of Business 1520 NW 97TH PL CORAL SPRINGS, FL 33071		Mailing Address 1986 NW 104 AVE. CORAL SPRINGS, FL 33071	
2. Principal Place of Business 1520 NW 97th PL. Suite, Apt. #, etc.		3. Mailing Address 1520 NW 97th PL. Suite, Apt. #, etc.	
City & State Coral Springs FL		City & State Coral Springs FL	
Zip 33071		Zip 33071	
4. FEI Number 01-0761080		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent LILA TERESA PIZZINO 1520 NW 97TH PL CORAL SPRINGS, FL 33071		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <i>Lila T. Pizzino</i> Signature, typed or printed name of registered agent and title if applicable.		DATE 4/18/05 (NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERNANDEZ, GIUSEPPE C 1986 NW 104 AVE. CORAL SPRINGS, FL 33071	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. HERNANDEZ GIUSEPPEC 1520 NW 97th PL Coral Springs FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LILA TERESA PIZZINO 1986 NW 104 AVE. CORAL SPRINGS, FL 33071	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. LILA TERESA PIZZINO 1520 NW 97th PL. Coral Springs FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIUSEPPE, HERNANDEZ 1586 NW 104 AVE CORAL SPRINGS, FL 33071	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. GIUSEPPE Hernandez. 1520 NW 97th PL. Coral Springs FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PIZZINO, LILA T 1586 NW 104 AVE CORAL SPRINGS, FL 33071	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. 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 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: <i>Lila T. Pizzino</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE 4/18/05 Daytime Phone #	