## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

CITY-ST-7IP

SIGNATURE:

## May 04, 2006 8:00 am Secretary of State **DOCUMENT # L03000017135** 05-04-2006 90035 048 \*\*\*\*50.00 1. Entity Name BLUÉ SEA, L.L.C. Mailing Address Principal Place of Business いいいかおんりつ 711 COMMERCIAL DRIVE 711 COMMERCIAL DRIVE HOLLY HILL, FL 32117 HOLLY HILL, FL 32117 CR2E083 (11/05) 01032006 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0517571 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RHYNARD, M.A. DO NOT WRITE 515 SOUTH RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE MGR MAUGERI, RICHARD C NAME STREET ADDRESS 711 COMMERCIAL DRIVE CITY-ST-ZIP HOLLY HILL, FL 32117 TITLE NAME STREET ADDRESS CITY-ST-712 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED**