2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068009

Entity Name: BLUE WATER VII, LLC

City-St-Zip:

MGR

Title:

Name:

Address:

City-St-Zip:

FORT LAUDERDALE, FL 33316

FORT LAUDERDALE, FL 33308

SCHUMAN, PHILLIP R

60 BAY COLONY DRIVE

() Delete

FILED Mar 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 701 N.W. 19TH STREET SUITE 100 FORT LAUDERDALE, FL 33311 **New Mailing Address: Current Mailing Address:** 701 N.W. 19TH STREET SUITE 100 FORT LAUDERDALE, FL 33311 FEI Number: 20-3124084 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: SAAVEDRA, DAMASO W 312 S.E. 17TH STREET 2ND FLOOR FORT LAUDERDALE, FL 33316 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete PATEL, PRAKASH Name: Name: 701 N.W. 19TH STREET, SUITE 100 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: O'LEARY, MICEAL Name: Address: 701 N.W. 19TH STREET, SUITE 100 Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SAAVEDRA, DAMASO W Name: Name: 312 S.E. 17TH STREET, 2ND FLOOR Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

() Change () Addition

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PRAKASH PATEL MGR 03/22/2006