SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTE[illegible], 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DU[illegible]TATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTM[illegible]ATE
Sandra B. M[illegible]
Secretary o[illegible]
DIVISION OF COR[illegible]NS

FILED
1995 AUG -1 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L72423** **(1)**

1. Corporation Name

BLUE FIN INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
7216 NW 56 ST MIAMI FL 33166 US	7216 N.W. 56TH ST. MIAMI FL 33166 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/11/1990**
3a. Date of Last Report: **04/14/1994**

2. Principal Place of Business
21: 7531 NW 52 St.
22: Suite, Apt. #, etc.: [illegible]
23: City & State: MIAMI FL.
24: Zip: 33166
25: Country: DADE

2a. Mailing Address
26: SAME
27: Suite, Apt. #, etc.:
28: City & State:
29: Zip:
30: Country:

4. FEI Number: **65-0194645** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

6. *This corporation has liability for intangible tax under s. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RODRIGUEZ, LUIS H.
12529 S.W. 95TH TERRACE
MIAMI FL 33186

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City **FL** 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 07-26-95
Signature of officer or director of registered agent, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	11 TITLE	☒ Change ☐ Addition
NAME	RODRIGUEZ, LUIS H.	12 NAME	RODRIGUEZ, LUIS H.
STREET ADDRESS	12529 S.W. 95TH TERRACE	13 STREET ADDRESS	9100 S.W. 122 ND. PL. #414
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	MIAMI, FL. 33186
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, LUIS H.	22 NAME	
STREET ADDRESS	12529 S.W. 95TH TERRACE	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	
TITLE	DV	31 TITLE	☐ Change ☐ Addition
NAME	PARTRIDGE, DAVID	32 NAME	
STREET ADDRESS	10234 N.W. 57TH ST.	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33178	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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.

SIGNATURE: [signature] 7-26-95 (305)888-7518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0066599 CP