

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
(AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

97 SEP -2 AM 6:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M04097 (5)
1. Corporation Name
BLUE SEA GEM CORPORATION



Principal Place of Business
33 VIA MIZNER
PALM BEACH FL 33480
US

Mailing Address
33 VIA MIZNER
PALM BEACH FL 33480
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		08/17/1984		05/01/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		59-2442685		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
Zip		Country		24		25	
29		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

SCHNARE, JAMES H., ESQ.
50 COCOANUT ROW
SUITE 212
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTD	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	O'HARA, DENISE M.			1.2 NAME	600002283896--9		
STREET ADDRESS	3915 CLASSIC CT.			1.3 STREET ADDRESS	-09/03/97--01056--011		
CITY-ST-ZIP	WEST PALM BEACH FL			1.4 CITY-ST-ZIP	****165.00 ****165.00		
TITLE	SD	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	O'HARA, MICHAEL P.			2.2 NAME			
STREET ADDRESS	3915 CLASSIC CT.			2.3 STREET ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL			2.4 CITY-ST-ZIP			
TITLE		☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 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.

CR2E034 (4/97)