2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # M17067

1. Entity Name
BLUE BRIDGE CORP.

Principal Place of Business
2600 SW 3RD AVE.
SUITE 800
MIAMI, FL 33129

Mailing Address
PO BOX 450804
340 SEVILLA AVE.
MIAMI, FL 33245

01162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0192247 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ACEVEDO, RAFAEL A
2600 SW 3RD AVE.
SUITE 800
MIAMI, FL 33129

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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: 3-24-08
Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

U00000871918
04/10/08-80015-031 158.75

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARGHERI, ERNESTO OSCAR
STREET ADDRESS	3991 S.W. 128TH AVENUE
CITY-ST-ZIP	MIAMI, FL
TITLE	PD
NAME	IUBATTI, SERGIO
STREET ADDRESS	DRISDALE 5452, MUNRO
CITY-ST-ZIP	BUENOS AIRES, AR
TITLE	S
NAME	ACEVEDO, RAFAEL A
STREET ADDRESS	2600 SW THIRD AVE, SUITE 800
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 3-24-08 305-856-7586
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #