FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # M23621

(9)

FILED May 13 1997 8:00am Secretary of State

BLUE B	AY FINANCE CORPORATION	N				
Principal Place of Business C/O PHOENIX TRADE CORP B250 NW 27TH ST STE 310 MAIN FL 33122 US		Mailing Address 8250 NW 27TH ST STE 310 MIAMI. FL 33122-1904 US				
00		03			3. Date Incorporated or Qualified 11/20/1985	3a. Date of Last Report 04/25/1996
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	4	26			59-2646597	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State		6. Election Campaign Financing	Fee Required	
23		28			Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	/ /	8. This corporation has liability for in	
24	25	29	30		Horida Statutes	Yes X No
	9, Name and Address of Curren	· - ·		T Nt	10. Name and Address of New Reg	stered Agent
	/ OFFICES OF WILLIAM J MOTY(IX PLACE	CZKA	81	Name		
	ik place 10 SW 128TH ST		82	Street /	Address (P.O. Box Number is Not Acceptable	1)
	MI FL 33186		1 83	 		
	W. 12 00 100					
i			84	City		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0503 egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 607-1508, Florida Stat of Horida. Such change was itions of, Section 607.0505, I	utes the abov s authorited b Horida Slatute	e-named of y the corp s	corporation submits this statement for the purioration's board of directors. Thereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Phone in the second sec					
12.	Signature, typed or printed name of registers argue OFFICERS AND		OH Reg struct Age	ent signative i	regeing when reinstalling) ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIRECTORS IN 12
TITLE	P	Æ DELETE	—— - mu -	·· T	PRESIDENT	Change A Addition
NAME	TALBOT, LASSELVE		1 JAME		WILLIAM HINDS	
STREET ADDRESS	8250 NW 27TH ST STE 310		1, 516(1)	ACORESS	8250 NW 27TH STE#31	.0
CITY-ST-ZIP	MIAMI FL		1 1TY - 5	31 ZIP	MIAMI, FL. 33122	
TITLE	VP	DELETE	2 1111		VP	Change Addition
NAME	CARTY, SYLVIA		24 AME		SYLVIA CARTY	
STREET ADDRESS	8250 NW 27TH ST STE 310 MIAMI FL			ADDRESS	8250 NW 27TH ST. ST	E#310
CITY-ST-ZIP TITLE	MINNI FL	DELFTE	2 ITY .	St ZiE	MIAMI, FL. 33122	Constant Design
NAME						Crange Addition
STREET ADDRESS			3 ME	ADDRESS		
CITY-ST-ZIP			188	ST ZIP		1
TITLE		☐ DELETE				Change Addition
NAME			4 MF			
STREET ADDRESS			1 4	ADDRESS		
CITY-ST-ZIP			y s	3 29P		
TITLE	. 110 100	DELETE	3			Change Addition
NAME			5 AF	-		
STREET ADDRESS			5 EF1	ADDRESS		
CITY-ST-ZIP		The second	<u>5</u>	1 - ZIP		
TITLE		☐ DETLIE	6 F	Į		Change Addition
NAME execut approve			6 MI			
STREET ADDRESS CITY-ST-ZIP				ADDRESS		
GITT-OT-FIE			ti, Y-S	J-7'P		1

14. I do hereby certify that the information supplied with this filing does not qualify for information indicated on this annual report or supplemental annual report is frue at I am an officer or director of the corporation or the receiver or trustee empowered to the corporation of the receiver or trustee empowered to the corporation of the receiver or trustee.

exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the occurate and that my signature shall have the same legal effect as if made under eath; that xecute this report as required by Chapter 607, Florida Statutes; and that my name.