~~LAST NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.~~
~~AMOUNT DUE ON OR BEFORE 8/10/94: $220 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $370)~~

CORPORATION
ANNUAL REPORT
1997 ~~1994~~

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 31 1997 8:00am
Secretary of State

DOCUMENT # M40051

1. Corporation Name BLUE HOMES CORPORATION
1883 N.W. 7 ST. #4
MIAMI, FL.33125

Mailing Address | Principal Place of Business

AMENDED

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. Mailing Address
Street, Apt #, etc.
City & State
Zip | Country 25

2a. Principal Place of Business
26
Street, Apt #, etc.
27
City & State
28
Zip 29 | Country 30

3. Date Incorporated or Qualified: 10-15-1986
3a. Date of Last Report:
4. FEI Number: 59-2737780 | Applied For | Not Applicable
5. Corporate Filing Fee: $8.75 Additional Fee Required [ ]
6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status [ ]
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes [XX] Yes [ ] No

9. Name and Address of Current Registered Agent
ARIADNE DE LAS CAGIGAS
13570 S.W. 39 LANE
MIAMI, FL. 33175

10. Name and Address of New Registered Agent
B1 Name: ENRIQUE DE LAS CAGIGAS
B2 Street Address (P.O. Box Number is Not Acceptable): 7295 S.W. 34 RD.
B3
B4 City: MIAMI FL B5 Zip Code: 33155

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE: X [signature] JUL - 1 1997
Signature, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent signature required when non-filing) | DATE

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE	PRES. (DELETE)	1 TITLE	PRES. (ADDITION)
2 NAME	ARIADNE DE LAS CAGIGAS	2 NAME	ENRIQUE DE LAS CAGIGAS
3 STREET ADDRESS	13570 S.W 39 LANE	3 STREET ADDRESS	7295 S.W. 34 RD.
4 CITY, ST, ZIP	MIAMI, FL.33125	4 CITY, ST, ZIP	MIAMI, FL.33155
1 TITLE		2 TITLE	
2 NAME		2 NAME	
3 STREET ADDRESS		3 STREET ADDRESS	
4 CITY, ST, ZIP		4 CITY, ST, ZIP	
1 TITLE		3 TITLE	
2 NAME		3 NAME	
3 STREET ADDRESS		3 STREET ADDRESS	
4 CITY, ST, ZIP		4 CITY, ST, ZIP	
1 TITLE		4 TITLE	
2 NAME		4 NAME	
3 STREET ADDRESS		4 STREET ADDRESS	
4 CITY, ST, ZIP		4 CITY, ST, ZIP	
1 TITLE		5 TITLE	
2 NAME		5 NAME	
3 STREET ADDRESS		5 STREET ADDRESS	
4 CITY, ST, ZIP		5 CITY, ST, ZIP	PE 7-31
1 TITLE		6 TITLE	
2 NAME		6 NAME	400002255224
3 STREET ADDRESS		6 STREET ADDRESS	-08/01/97--01088--000
4 CITY, ST, ZIP		6 CITY, ST, ZIP	***61.25

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)(k), Florida Statutes. 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X [signature] PRESIDENT JUL - 1 1997 (305) 6424144