2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000838

FILED Feb 08, 2006 Secretary of State

Entity Name: BLUE WAVES CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

315 86TH STREET UNIT 3 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

315 86TH STREET UNIT 3 MIAMI BEACH, FL 33141

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TORO, MARI TORO, MARIE

315 86TH STREET UNIT 3
MIAMI BEACH, FL 33141 US
315 86TH STREET UNIT 3
MIAMI BEACH, FL 33141 US

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.

SIGNATURE: MARIE TORO 02/08/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: TORO, MARI TORO, MARIE

 Address:
 315 86TH STREET UNIT 3
 Address:
 315 86TH STREET UNIT 3

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: SD () Delete Title: VP (X) Change () Addition Name: MARTINEZ, YOANYS Name: MENDEZ, STAVROULA

 Address:
 315 86TH STREET UNIT 3
 Address:
 315 86TH STREET UNIT 3

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 MENDEZ, SANDRA

 Address:
 Address:
 315 86TH STREET UNIT 3

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: Title: T () Change (X) Addition

 Name:
 Name:
 SIMEON, MARIE

 Address:
 Address:
 315 86TH STREET UNIT 3

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STAVROULA MENDEZ VP 02/08/2006