

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000838

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: BLUE WAVES CONDOMINIUM ASSOCIATION INC.

## Current Principal Place of Business:

3842 S.W. 137TH AVENUE  
MIAMI, FL 33175 US

## New Principal Place of Business:

854 SW 151 PLACE  
MIAMI, FL 33194 US

## Current Mailing Address:

3842 S.W. 137TH AVENUE  
MIAMI, FL 33175 US

## New Mailing Address:

854 SW 151 PLACE  
MIAMI, FL 33194 US

FEI Number: 20-8238503

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ACEVEDO, EVELYN  
3842 SW 137TH AVENUE  
MIAMI, FL 33175 US

## Name and Address of New Registered Agent:

RUMBAUT, JOSE F  
854 SW 151 PLACE  
MIAMI, FL 33194 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: JOSE F. RUMBAUT

04/23/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D/P ( ) Delete  
Name: BARTOLOME, RAMON  
Address: 1135-92ND STREET UNIT 104  
City-St-Zip: BAY HARBOR ISLAND, FL 33154 US

Title: DVP ( ) Delete  
Name: PORRAS, CARLOS A  
Address: 1135-92ND STREET, UNIT 102  
City-St-Zip: BAY HARBOR ISLAND, FL 33154 US

Title: D/ST ( ) Delete  
Name: MORRIS, CARLOS  
Address: 1135-92ND STREET, UNIT 101  
City-St-Zip: BAY HARBOR ISLAND, FL 33154 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CARLOS MORRIS

D/ST

04/23/2008

Electronic Signature of Signing Officer or Director

Date