

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011010

FILED
Jul 27, 2007
Secretary of State

Entity Name: BLUE BAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% RAUL E SALAS, ESQ
6301 SUNSET DRIVE
SOUTH MIAMI, FL 33143

New Principal Place of Business:

8145 NW 155 STREET
SUITE A
MIAMI LAKES, FL 33016

Current Mailing Address:

% RAUL E SALAS, ESQ
6301 SUNSET DRIVE
SOUTH MIAMI, FL 33143

New Mailing Address:

8145 NW 155 STREET
SUITE A
MIAMI LAKES, FL 33016

FEI Number: 45-0560319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SALAS, RAUL E ESQ.
6301 SUNSET DRIVE
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOMEZ, ALEXANDER
Address: 8011 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33137

Title: VPST () Delete
Name: LI, PHILLIP
Address: 8011 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33137

Title: D (X) Delete
Name: LI, PHILLIP
Address: 8011 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33137

Title: D (X) Delete
Name: GONZALEZ, ALBERTO
Address: 8011 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33137

Title: D (X) Delete
Name: RODRIGUEZ, OSVALDO
Address: 8011 NE BAYSHORE CT
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, ALEXANDER
Address: 8145 NW 155 STREET, SUITE A
City-St-Zip: MIAMI LAKES, FL 33016

Title: VPST (X) Change () Addition
Name: LI, PHILLIP
Address: 8145 NW 155 STREET, SUITE A
City-St-Zip: MIAMI LAKES, FL 33016

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: ALEXANDER GOMEZ

P

07/27/2007

Electronic Signature of Signing Officer or Director

Date