FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90963 001 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80039936

DOCUMENT # P00000071823

1. Entity Name
BLUE HARBOR, INC.

Principal Place of Business	Mailing Address
2234 N. FEDERAL HWY SUITE 476 BOCA RATON, FL 33431	2234 N. FEDERAL HWY SUITE 276 BOCA RATON, FL 33431

2. Principal Place of Business	3. Mailing Address
3674 SE Fairway E.	3674 SE Fairwy E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Stuart, FL	City & State: STUART, FL.
Zip: 34997 Country: MARTIN	Zip: 34997 Country: MARTIN

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1029281 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRUDEN, JAMES L ESQ.
370 W. CAMINO GARDENS BLVD.
STE 210
BOCA RATON, FL 33432

7. Name and Address of New Registered Agent

Name: Michael G. Rosenberg
Street Address (P.O. Box Number is Not Acceptable): 3674 SE Fairway E.
City: Stuart FL Zip Code: 34997

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] · Michael G. Rosenberg · President 2/20/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSENBERG, MICHAEL 2234 N. FEDERAL HWY PBM 476 BOCA RATON, FL 33431	☐ Delete	ROSENBERG, MICHAEL 3674 SE Fairwy E. Stuart, FL. 34997	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] / Michael G. Rosenberg 2/20/03 561-213-0902
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #