


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P03000058874</b> 1. Entity Name <b>BLUEFISH CONSTRUCTION, INC.</b>	
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Principal Place of Business <b>5365 E COUNTY HWY 30-A SEAGROVE BCH, FL 32459</b>	Mailing Address <b>5365 E COUNTY HWY 30-A SEAGROVE BCH, FL 32459</b>
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**DO NOT WRITE IN THIS SPACE**



04052007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>02-0693452</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

**SERAFIN, HEATHER  
2912 MOSSY TUMBER TR.  
VALRICO, FL 33594**

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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MOCHEL, GARY 1238 DEERWOOD DR DESTIN, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CHANCEY, WALTON 46 ADALIA AVE TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV NUZUM, LARRY 208 N FREEMONT TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JONES, GREG 3712 W BARCELONA TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS COPE, TERRY 612 CAROLYN DR BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000007000000  
04/19/07-80065-020 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**  **4/5/07** **813-248-9258**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #