2006 FOR PROFIT CORPORATION . ANNUAL REPORT

Mar 23, 2006 08:00 AM **DOCUMENT # P03000093521** Secretary of State BLUE SEAS VENTURES, INC. Principal Place of Business Mailing Address **4230 TIDEVIEW DRIVE NORTH 4230 TIDEVIEW DRIVE NORTH** JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 03042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 32-0090251 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARTIN, TIMOTHY S DO NOT WRITE 4230 TIDEVIEW DRIVE NORTH JACKSONVILLE BEACH, FL 32250 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MARTIN, TIMOTHY S NAME STREET ADDRESS 4230 TIDEVIEW DRIVE NORTH U00000478063 CTIY-ST-ZIP JACKSONVILLE BEACH, FL 32250 04/07/06-80016-002 150.00 TITLE VSD NAME MARTIN, SUSAN M STREET ADDRESS 4230 TIDEVIEW DRIVE NORTH CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP 7333 F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STITLE I ADDRESS CHY-ST-ZIP TITLE

FILED

12. Thereby certify that the information supplied with this filing does not quality 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 direction of the corporation or the receiver or trustee empowered to exceed this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 1 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME SITMET ADDRESS CITY-SI-ZIP

7=016