2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093657

Entity Name: BLUE M CORPORATION

FILED Apr 03, 2006 Secretary of State

19380 COLLINS AVE, STE 607 119 NE 19 CT #G111

SUNNY ISLES, FL 33160 WILTON MANORS, FL 33305

Current Mailing Address: New Mailing Address:

19380 COLLINS AVE, STE 607 119 NE 19 CT #G111

SUNNY ISLES, FL 33160 WILTON MANORS, FL 33305

FEI Number: 20-0182455 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOWNSON, ANA G TOWNSON, ANA G 19380 COLLINS AVE, STE 607 119 NE 19 ĆT #G111

SUNNY ISLES, FL 33160 WILTON MANORS, FL 33305 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: 04/03/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition TOWNSON, KATHERINE TOWNSON, KATHERINE Name: Name: 19380 COLLINS AVE, STE 607 Address: 119 NE 19 CT #G111 Address:

City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: WILTON MANORS, FL 33305

Title: Title: (X) Change () Addition () Delete TOWNSON, ANA G TOWNSON, ANA G Name: Name:

19380 COLLINS AVE, STE 607 Address: 119 NE 19 CT #G111 Address: WILTON MANORS, FL 33305 SUNNY ISLES, FL 33160 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition

Name: BANUS, ANA L Name: 119 NE 19 CT #G111 Address: Address: City-St-Zip: City-St-Zip: WILTON MANORS, FL 33305

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANA BANUS 04/03/2006 D