

2004

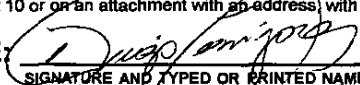
**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 01, 2004 8:00 am
Secretary of State

04-01-2004 90033 009 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000105693					
1. Entity Name Blue Bay Estates Corp.					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 4890 N.W. 102nd Ave. Suite, Apt. #, etc. Suite 102 City & State Doral, FL Zip 33178			3. Mailing Address 4890 N.W. 102nd Ave. Suite, Apt. #, etc. Suite 102 City & State Doral, FL Zip 33178		
			4. FEI Number 20-0253489		
			Applied For Not Applicable		
Country USA			Country USA		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
DO NOT WRITE IN THIS SPACE					
7. Name and Address of Current Registered Agent					
Name Canizares, Diego G.					
Street Address (P.O. Box Number is Not Acceptable) 4890 N.W. 102nd Ave.					
Apt. 102					
City Doral					
FL Zip Code 33178					
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					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$81.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P Canizares, Diego G. 4890 N.W. 102nd Ave., Apt. 102 Doral, FL 33178		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/T Diaz, Jorge F. Km 5 1/2 Via Manta Montecristy Manta, Ecuador		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S Gonzalez-Artigas, Carlos Km 5 1/2 Via Manta Montecristy Manta, Ecuador		TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.					
SIGNATURE 		Diego G. Canizares		305-513-4652	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

CR2E034B (12/02)