

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156849

FILED  
Mar 09, 2005  
Secretary of State

Entity Name: BLUEWATER APPRAISAL GROUP, INCORPORATED

## Current Principal Place of Business:

5312 SW 141 PLACE  
MIAMI, FL 33175

## New Principal Place of Business:

9210 SUNSET DRIVE  
SUITE 102  
MIAMI, FL 33173 US

## Current Mailing Address:

5312 SW 141 PLACE  
MIAMI, FL 33175

## New Mailing Address:

9210 SUNSET DRIVE  
SUITE 102  
MIAMI, FL 33157 US

FEI Number: 20-1894336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONDACA, OSMANY  
5312 SW 141 PLACE  
MIAMI, FL 33175 US

## Name and Address of New Registered Agent:

MONDACA, OSMANY  
9210 SUNSET DRIVE  
SUITE 102  
MIAMI, FL 33173 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:

03/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MONDACA, OSMANY  
Address: 5312 SW 141 PLACE  
City-St-Zip: MIAMI, FL 33175

Title: V ( ) Delete  
Name: MONDACA, JAMIE  
Address: 5312 SW 141 PLACE  
City-St-Zip: MIAMI, FL 33175

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MONDACA, OSMANY  
Address: 9210 SUNSET DRIVE, SUITE 102  
City-St-Zip: MIAMI, FL 33173

Title: V (X) Change ( ) Addition  
Name: PEREZ, SALVADOR O  
Address: 3036 MATILDA STREET  
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 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: OSMANY MONDACA

P

03/09/2005

Electronic Signature of Signing Officer or Director

Date