2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036214

Address

City-St-Zip:

FILED Apr 12, 2006 Secretary of State

Entity Name: BLEU SKIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 3516 RIDGE BLVD 3351 TAMPA RD PALM HARBOR, FL 34684 PALM HARBOR, FL 34684 **Current Mailing Address: New Mailing Address:** 200 9TH AVE. N 3516 RIDGE BLVD PALM HARBOR, FL 34684 STE. 200 SAFETY HARBOR, FL 34695 FEI Number: 20-2469799 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: DIVINCENZO, JUDITH DIVINCENZO, JUDITH 3516 RIDGE BLVD 200 9TH AVE. N PALM HARBOR, FL 34684 US STE. 200 SAFETY HARBOR, FL 34695 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: JUDITH DIVINCENZO 04/12/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition DIVINCENZO, JUDITH STE, ROBERT Name: Name: 3516 RIDGE BLVD 4149 RIDGMOOR DR. N Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34685 Title: () Delete Title: () Change (X) Addition DIVINCENZO, JUDITH Name: Name: 200 9TH AVE. N, STE. 200 Address: Address: SAFETY HARBOR, FL 34695 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: GRANT, JOHN Name:

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.

Address:

City-St-Zip:

SIGNATURE: JUDITH DIVINCENZO 04/12/2006 ٧

200 9TH AVE. N, STE. 200

SAFETY HARBOR, FL 34695