## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000060920

City-St-Zip:

Entity Name: BLUEMELLOW HOLDINGS CORP

FILED Mar 12, 2007 Secretary of State

Current Principal Place of Business:			New Pr	New Principal Place of Business:			
5491 N. UI 104A	NIVERSITY DI	RIVE					
	PRINGS, FL 3	330674644 US					
Current Mailing Address:			New Ma	New Mailing Address:			
5491 N. UI 104A	NIVERSITY DI	₹.					
	PRINGS, FL 3	330674644 US					
FEI Number:	: 20-3281770	FEI Number Applied For ( )	FEI Number Not A	Applicable ( )	Certificate of Status Desired ( )		
Name and	Address of (	Current Registered Agent:	Name a	Name and Address of New Registered Agent:			
5491N. UN 104A	NIVERSITY DF	RNATIONAL CORP R. 330674644 US					
			e nurnose of changir	na its reaistei	red office or registered agent, or both,		
	e of Florida.	Submite this statement for th	e purpose or criangi	ig ito regiotei	ed office of registered agent, of both,		
SIGNATU	RE:						
	Electro	nic Signature of Registered A	\gent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICER	S AND DIREC	CTORS:	ADDITI	ONS/CHAN	GES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	MELLO, PAUL RUA GUSTAVO	) Delete O CESAR B O SAMPAIO, 609 / 701 RO, RJ 22010 BR	Title: Name: Address: City-St-Zi	p:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	(	) Delete	Title: Name: Address: City-St-Zi	8628 VIA	( ) Change (X) Addition CELLOS, ALOYSIO ANCHO RD TON, FL 33433		
Title: Name: Address:	(	) Delete	Title: Name: Address:		( ) Change (X) Addition O, OCTAVIO GIARDINO		

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.

City-St-Zip:

BOCA RATON, FL 33433

SIGNATURE: PAULO C. B MELLO P 03/12/2007