

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000035443

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** BLUE CORNER CREATIONS INC.

**Current Principal Place of Business:**

1216 PARK GREEN PLACE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

6821 SEMINOLE DRIVE  
BELLE ISLE, FL 32812

**Current Mailing Address:**

1216 PARK GREEN PLACE  
WINTER PARK, FL 32789

**New Mailing Address:**

6821 SEMINOLE DRIVE  
BELLE ISLE, FL 32812

**FEI Number:** 22-3922289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRISEY, THOMAS G  
1216 PARK GREEN PLACE  
WINTER PARK, FL 32789 US

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

MORRISEY, THOMAS G  
6821 SEMINOLE DRIVE  
BELLE ISLE, FL 32812 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/26/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: MORRISEY, THOMAS G  
Address: 1216 PARK GREEN PLACE  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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 all other like empowered.

SIGNATURE: THOMAS G. MORRISEY

PSTD

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date