2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000052904

Entity Name: BLUE CONCEPT STUDIO INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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4219 FOX RUN CT. 1111 BRICKELL BAY DRIVE

WESTON, FL 33331 2011

MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

4219 FOX RUN CT. 1111 BRICKELL BAY DRIVE WESTON, FL 33331

2011

MIAMI, FL 33131

FEI Number: 20-8970949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MININO, JOSE A MININO, JOSE A 4219 FÓX RUN CT. 1111 BRICKELL BAY DR US WESTON, FL 33331 2011 MIAMI, FL 33131 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: JOSE A MININO 04/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition PSD () Delete Title: PSD

MININO, JOSE A Name: Name: MININO, JOSE A

4219 FOX RUN CT. 1111 BRICKELL BAY DRIVE Address: Address:

City-St-Zip: WESTON, FL 33331 City-St-Zip: MIAMI, FL 33131

Title: VD Title: () Delete () Change () Addition

Name: GOMEZ, RODRIGO Name: 4219 FOX RUN CT. Address: Address: WESTON, FL 33331 City-St-Zip: City-St-Zip:

Title: () Delete Title: VD () Change () Addition

RUIZ, RICARDO V Name: Name: 12073 GREYWING SQ. A4 Address: Address: City-St-Zip: RESTON, VA 201911886 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: JOSE A MININO **PSD** 04/30/2009