## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2008 8:00 am Secretary of State 04-30-2008 90190 012 \*\*\*150.00

DOCUMENT # P0700010  1. Entity Name BLUE-OCEAN MANAGEMENT CO					<b>.</b>	04-30-2008		2 ***150	0.00
Principal Place of Business	Mailing Address		·	<del></del> .	b	<b>UU3376</b> 7	•		
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address								
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Suite, Apt. #, etc.	Suite, Apt. #, etc.			- 1	04222008	Chg-P	CR2E034	(12/06)	
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City & State	City & State	City & State			4. FEI Numbe				plied For
	7:-				26-115	6816		-	Applicable
Zip Country	ip Country Zip		Country .		5. Certificate	of Status Desired	□ <b>\$</b> 1	8.75 Addi	itional
6. Name and Address of Curre	ant Pagistared Agast	1	1		7 Name and	Address of New D			
o. Name and Address of Curr	ent izediateren vident	<del></del>	Name		. Haing and	Address of New R	agistered AG	B:111	
CORPORATION SERVICE COMPANY									
1201 HAYS STREET			Street Add	ldress (P.	.O. Box Numbe	r is Not Acceptable	3)		
TALLAHASSEE, FL 32301			<u> </u>			<del></del>			
			City				FL	Zip Code	3
8. The above named entity submits this statemen	at for the average of changing its		ad office as	/Odieto/o	d access or both	in the State of Ele		ما شد د مثاله	
the obligations of registered agent.	it for the porpose or crianging its	a registari	ac onice or r	iadizreie.	d agent, or son	I, III IIIO SIAIG OI FR	onua. Tamiai	riinai witti, i	and accept
SIGNATURE									
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Jared S. Florian 4-22-08 (941) 727-2713