2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000050

Entity Name: BLUE HERON AQUACULTURE, INC

BOCA RATON, FL 33433 US

BOCA RATON, FL 33433 US

CHERCH, SAL

() Delete

21218 ST. ANDREWS BOULEVARD, #645

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FILED Jan 24, 2008 Secretary of State

Lineity Ivai	me. blociil	INON AGOACOLTONE, INC.					
Current P	rincipal Place	of Business:	New Pri	New Principal Place of Business:			
21218 ST. 645	ANDREWS B	OULEVARD	14545 J 167	MILITARY TR	AIL		
	TON, FL 3343	3 US		DELRAY BEACH, FL 33484 US			
Current M	lailing Addres	ss:	New Ma	New Mailing Address:			
P.O. BOX COCOA, F	307 FL 32923-030	US					
FEI Number:	: 26-1668579	FEI Number Applied For()	FEI Number Not A	oplicable ()	Certificate of Status Desi	red ()	
Name and	Address of C	Current Registered Agent:	Name a	Name and Address of New Registered Agent:			
21218 ST. 645	EINDUSTRIES ANDREWS B TON, FL 3343	ÓULEVARD					
	named entity : e of Florida.	submits this statement for the	purpose of changing	g its registere	d office or registered agen	t, or both,	
SIGNATUR	RE:						
	Electror	nic Signature of Registered A	gent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PAPADOYIANI	REWS BOULEVARD, # 645	Title: Name: Address: City-St-Zip	ı.	() Change () Addition		
Title: Name: Address:	PAPADOYIANI) Delete 5, ERNEST D :REWS BOULEVARD, # 645	Title: Name: Address:	P CHERCH, S. 14545 J MIL	(X) Change () Addition AL JTARY TRAIL		

City-St-Zip:

S/T

HIPPLE, ROBERT

14545 J MILITARY TRAIL

Title:

Name:

Address:

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: ROBERT HIPPLE S/T 01/24/2008

DELRAY BEACH, FL 33484 US

DELRAY BEACH, FL 33484 US

(X) Change () Addition