### 2008 FOR PROFIT CORPORATION ANNUAL REPORT

# ANNUAL REPORT DOCUMENT # P93000033005 1. Entity Name BLUE HERON MARINE SERVICE, INC.



Principal Place of Business

13476 157 CT N. JUPITER FARMS, FL 33478

78 115

Mailing Address

13476 157 CT N.

JUPITER FARMS, FL 33478

US

#### FILED Apr 24, 2008 08:00 AN Secretary of State



04142008

No Chg-P

CR2E034 (11/05)

FEt Number
 65-0410757

Applied For Not Applicab

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CASTILLO, JOHN DEL 13476 157 CT N. JUPITER FARMS, FL 33478

TITLE NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

### DO NOT WRITE IN THIS SPACE

		]					
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. 1 ar	m familiar with, an	d acce
SIGNATURE_	Signature, typed or printed name of registered agent and little if	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	 :	—
FILE NOWII! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May 895 Added to Fees		000000920301 14/08-80038-016	158.75		
10. OFFICERS AND DIRECTORS		TORS			*		
TITLE Name Street address City-St-Zip	PTD DELCASTILLO, JOHN 13476 157TH COURT N. JUPITER FARMS, FL						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DELCASTILLO, JOHN 13476 157TH COURT NORTH JUPITER FARMS, FL 33478						

## DO NOT WRITE IN THIS SPACE

11/2 /00 Ell 202 Clas

12. I hereby certify that the internetion supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental record 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attackment with an address, with all other like empowered.