FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P93000044583 (1)

BLUE OCEAN BLUE, INC.		
Principal Place of Business	Mailing Address	
5838 COLLINS AVENUE	5838 COLLINS AVENUE	
APT. 9-H	APT, 9-H MIAMI BEACH FL 33140	

FILED Jun 01 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/22/1993</u> Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 2410 N. Bay 26 65-0435473 Not Applicable Suite, Apt. #, etc. \$8.75 Additional □ Certificate of Status Desired Fee Required Mami 27 City & State \$5.00 May Be 6. Election Campaign Financing 33140 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 -Goldman: Peter R OOK 1080 S.E. SRD AVENUE 82 FORT LAUDERDALE FL 33316 83 333140 84 City Zip Code 11. Pursuant to the provisions of Socious 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. pril 23, 1998 (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OLLICERS AND DIRECTORS 12. 13. DELETE Change Sandra Cook TITLE 1.1 1/TLF RONAL SUSANE NAME 1.2 NAME 2410 n. Buy Rd Rresident 5000 COLLING AVENUE, APT. 9-H 1.3 STREET ADDRESS STREET ADDRESS MIAMI-BEACH FL 89140 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZiP 2.4 CITY-ST-ZIP DELETE Addition 3.1 1ITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY+ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change Addition TIFLE 4 1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREFT ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME -06/02/98--01087--021 STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 13 if changed, or on an attachment with an address.

4-19 1991 215-534-1659

***150.00