2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000087118 1. Entity Name BLUE LAGOON CONSTRUCTION, INC.					N1ay 19, 2001 8:00 an Secretary of State 05-19-2001 90286 035 ***150.00			
Principal Place of Business Mailing Address C/O KB HOLDINGS / 647 E. DANIA BCH BLVD DANIA BEACH FL 33004 C/O KB HOLDINGS / 647 E DANIA BEACH FL 33004			DANIA BCH BLVD			-		
Principal Place of Business 3. Mailing Address								
% Atlantia Holdings % Atlantia Holdings 910 SE 17 th St., Suite 300 910 SE 17 th St., Ft. Lauderdale, I			Suite 300	4. FEI Number 65-0461130 5. Certificate of Status Pasired			Ap No \$8.75 Add	
	C No. and Address of Comment	Designation of Security				dress of New Regi	Fee Required	d
WAGNER, J C/O KB HOLDINGS 647 EAST DANIA BEACH BOULEVARD DANIA BEACH FL 33004			% <i>I</i> 910	SE 17 th				
9. This corpo	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	and title if applicable. (NOTE: 1	Registered Agent sig LFEE IS \$15 1 Fee will be	nature required	when reinstating) 10. Electric Trust F	on Campaign Financ Fund Contribution.	cing \$5.0	0 May Be.
11,	OFFICERS AND		12.	¬ ъ	ADDITIONS/CH	ANGES TO OFFICE	ERS AND DIRECTORS Change	S IN 11 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Boulis, Gus C/O KB Holdings / 647 E. Dai Dania Beach Fl 33004	VIA BCH BLVD	NAME STREET ADDRES CITY-ST-ZIP	s ' % At 910 S	ey, William A. dantia Holdings SE 17 th St., # 300 auderdale, FL 33	216	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Wilson, W.M. C/O KB Holdings / 647 E. Dai Dania Beach Fl 33004	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	S % A 910	L S O N 、 W・ A tlantia Holdings S.E. 17 th St., #	1 . 300	YTT Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	S Farr % A	Ft. Lauderdale, FL 33316 S Farrell, James B. % Atlantia Holdings 910 SE 17 th St., #300 Ft. Lauderdale, FL 33316		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete .	TITLE NAME STREET ADDRES CITY-ST-ZIP	Ft. I			hange	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	ss			☐ Change	☐ Addition
indicated of the cor	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an approcess,	s true and accurate and that my owered to execute this report a	v sianature sha	II have the	same legal effect at	s it made under oat	n: that i am an officer	or airector i

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME & SIGNING OFFICER OR DIRECTOR

SIGNATURE: _