

**CORPORATION
ANNUAL REPORT
1995**


FLORIDA DEPARTMENT OF STATE
Sandra B. Northerm
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 5:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PG4000075374
1. Corporation Name
BLUEWATER WORLDWIDE INVESTMENTS, INC

100001486581
-05/12/95--01122--006
*****200.00 *****200.00
DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
1428 BRICKELL AVE - SUITE 204
MIAMI FLORIDA 33131

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/13/94		3a. Date of Last Report	
21. Suite, Apt. #, etc.		2a. Suite, Apt. #, etc.		4. FEI Number 65-0549802		Applied For Not Applicable	
22. City & State		2a. City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip		2a. Zip		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country		2a. Country		7. This Corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent

LUIS DE LA CRUZ
241 Sevilla Avenue Suite 805
Coral Gables, Florida 33134

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code
FL

11. Pursuant to the provisions of Sections 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.

SIGNATURE

Signature typed or printed name of registered agent and fee # applies

NOTE: Registered Agent's signature required when replacing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1. TITLE	☐ Change ☐ Addition	
NAME	2. NAME		
STREET ADDRESS	3. STREET ADDRESS		
CITY-ST-ZIP	4. CITY-ST-ZIP		
TITLE	21. TITLE	☐ Change ☐ Addition	
NAME	22. NAME		
STREET ADDRESS	23. STREET ADDRESS		
CITY-ST-ZIP	24. CITY-ST-ZIP		
TITLE	31. TITLE	☐ Change ☐ Addition	
NAME	32. NAME		
STREET ADDRESS	33. STREET ADDRESS		
CITY-ST-ZIP	34. CITY-ST-ZIP		
TITLE	41. TITLE	☐ Change ☐ Addition	
NAME	42. NAME		
STREET ADDRESS	43. STREET ADDRESS		
CITY-ST-ZIP	44. CITY-ST-ZIP		
TITLE	51. TITLE	☐ Change ☐ Addition	
NAME	52. NAME		
STREET ADDRESS	53. STREET ADDRESS		
CITY-ST-ZIP	54. CITY-ST-ZIP		
TITLE	61. TITLE	☐ Change ☐ Addition	
NAME	62. NAME		
STREET ADDRESS	63. STREET ADDRESS		
CITY-ST-ZIP	64. CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K), 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. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jason Sherman - JASON SHERMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95 - 305-358-8440
Date Name/Phone