
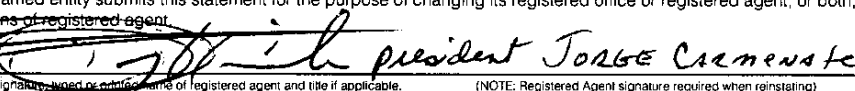
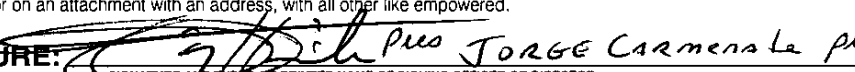


FILED
May 01, 2007 8:00 am
Secretary of State

40095394

DOCUMENT # P95000002267				Secretary of State	
1. Entity Name BLUE WATER APTS, INC.				05-01-2007 90027 031 ***150.00	
					
Principal Place of Business 1915 NW 28TH ST MIAMI, FL 33142		Mailing Address P.O. BOX 453253 MIAMI, FL 33245-3253			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0546349	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARMENATE, JORGE 2601 S.W. 23RD AVE. MIAMI, FL 33133				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  4/22/07 (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARMENATE, JORGE 2601 S.W. 23RD AVE. MIAMI, FL 33133 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CARMENATE, LEONILA L 2601 S.W. 23RD AVE. MIAMI, FL 33133 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  4/22/07 305 856552 SIGNATURE AND NAME OF SIGNING OFFICER OR DIRECTOR					

**ATTACHMENT****40095394**

Division of Corporations

Annual Report

Annual Report Help

Document Number

P95000002267

Business Entity Name

BLUE WATER APTS, INC.

FEI Number

650546349

FEI Number Status

Listed Above

Applied For

Not Applicable

Certificate of Status Desired

Yes

No

\$8.75 each

Election Campaign Financing Trust Fund Contribution

Yes

No

Principal Place of Business

Address

1915 NW 28TH ST

Suite, Apt. #, etc.

City, State

MIAMI**FL**Zip Code & Country **33142****Mailing Address**

Address

P.O. BOX 453253

Suite, Apt. #, etc.

City, State

MIAMI**FL**Zip Code & Country **332453253****Name and Address of Registered Agent**

Name (Last, First, Middle, Title)

CARMENATE**JORGE****- OR -**

Business to serve as RA

Address (PO Box is not acceptable) **2601 S.W. 23RD AVE.**

Suite, Apt. #, etc.

City, State

MIAMI**FL**

Zip Code & Country

33133**US**

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

ATTACHMENT

40095394

#P9500002267

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title D
Name (Last, First, Middle, Title) CARMENATE, JORGE
- OR -
Entity Name to serve as
Officer/Director

Street Address 2601 S.W. 23RD AVE.
City, State MIAMI, FL
Zip Code & Country 33133

Title D
Name (Last, First, Middle, Title) CARMENATE, LEONILA, L
- OR -
Entity Name to serve as
Officer/Director

Street Address 2601 S.W. 23RD AVE.
City, State MIAMI, FL
Zip Code & Country 33133

Title
Name (Last, First, Middle, Title)
- OR -
Entity Name to serve as
Officer/Director

Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
- OR -
Entity Name to serve as
Officer/Director

ATTACHMENT 40095394
#P95000002267

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

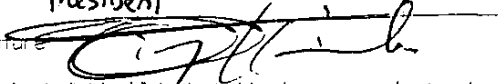
Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

President

Officer/Director Signature

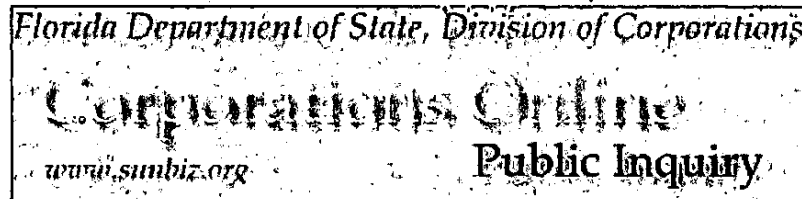


This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue Reset

Start Over

ATTACHMENT 40095394



Florida Profit

BLUE WATER APTS, INC.

PRINCIPAL ADDRESS
1915 NW 28TH ST
MIAMI FL 33142
Changed 04/10/2002

MAILING ADDRESS
P.O. BOX 453253
MIAMI FL 33245-3253
Changed 04/10/2002

Document Number
P95000002267

State
FL

FEI Number
650546349

Status
ACTIVE

Date Filed
01/09/1995

Effective Date
NONE

Registered Agent

Name & Address
CARMENATE, JORGE 2601 S.W. 23RD AVE. MIAMI FL 33133

Officer/Director Detail

Name & Address	Title
CARMENATE, JORGE 2601 S.W. 23RD AVE. MIAMI FL 33133	D
CARMENATE, LEONILA L 2601 S.W. 23RD AVE. MIAMI FL 33133	D

Annual Reports

Report Year	Filed Date
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ATTACHMENT

40095394

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Corporations Help