FILED
Jun 12, 2003 8:00 am
Secretary of State
05-02-2003 90747 013 ***158.75

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000044760

1. Entity Name
BLUE CAT SERVICE, INC

DO NOT WRITE IN THIS SPACE

55047719
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5630 PGA BLVD	SAME
Suite, Apt. #, etc. APT 1115	Suite, Apt. #, etc. SAME
City & State ORLANDO	City & State
Zip 32839 Country ORANGE	Zip Country

4. FEI Number 593327237 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

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7. Name and Address of Current 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 Sergio Couto SERGIO COUTO 5630 PGA BLVD #1115 ORLANDO, FL 32839
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DIRECTOR (OWNER)
NAME	SERGIO COUTO
STREET ADDRESS	5630 PGA BLVD # 1115
CITY-ST-ZIP	ORLANDO FL 32839
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CR2E034B (12/02)

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 6/26/2003 (407) 351-8916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #