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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067909 (8)

1. Corporation Name

BLUE WATER HUNTERS, INC.



Principal Place of Business

34 W. DELIDO DR.
MIAMI BEACH FL 33139

Mailing Address

34 W. DELIDO DR.
MIAMI BEACH FL 33139

3. Date Incorporated or Qualified

09/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1602 ALTON ROAD

26 1602 ALTON ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 38

27 38

City & State

City & State

23 MIAMI BEACH, FLORIDA

28 MIAMI BEACH, FLORIDA

Zip

Zip

Country

Country

24 33139

25 U.S.A.

29 33139

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name MARK E. FRIED

82 Street Address (P.O. Box Number is Not Acceptable)

1001 S. BAYSHORE DR.

83 STE 2706

84 City MIAMI

FL

85 Zip Code

33131

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, 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 title if applicable

(NOTE: Registered Agent signature required when non-binding)

DATE

3/1/96

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
1.5 TITLE ☐ DELETE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY-ST-ZIP
1.9 TITLE ☐ DELETE
1.10 NAME
1.11 STREET ADDRESS
1.12 CITY-ST-ZIP
1.13 TITLE ☐ DELETE
1.14 NAME
1.15 STREET ADDRESS
1.16 CITY-ST-ZIP
1.17 TITLE ☐ DELETE
1.18 NAME
1.19 STREET ADDRESS
1.20 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS ☐ Change ☐ Addition

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

1.5 TITLE ☐ Change ☐ Addition

1.6 NAME ☐ Change ☐ Addition

1.7 STREET ADDRESS ☐ Change ☐ Addition

1.8 CITY-ST-ZIP ☐ Change ☐ Addition

1.9 TITLE ☐ Change ☐ Addition

1.10 NAME ☐ Change ☐ Addition

1.11 STREET ADDRESS ☐ Change ☐ Addition

1.12 CITY-ST-ZIP ☐ Change ☐ Addition

1.13 TITLE ☐ Change ☐ Addition

1.14 NAME ☐ Change ☐ Addition

1.15 STREET ADDRESS ☐ Change ☐ Addition

1.16 CITY-ST-ZIP ☐ Change ☐ Addition

1.17 TITLE ☐ Change ☐ Addition

1.18 NAME ☐ Change ☐ Addition

1.19 STREET ADDRESS ☐ Change ☐ Addition

1.20 CITY-ST-ZIP ☐ Change ☐ Addition

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; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MILAN POPOVIC

07/06/96

305/5821102

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)