

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90025 034 ***150.00

DOCUMENT # P96000020984

1. Entity Name
BLUE WATER CONSULTING, INC.

Principal Place of Business

700 WST HILLSBORO BLVD.
 BLDG. 3. STE 101
 DEERFIELD BCH FL 33441
 US

Mailing Address

700 W HILLSBORO BLVD.
 BLDG 3. STE 101
 DEERFIELD BCH FL 33441
 US

2. Principal Place of Business

700 West Hillsboro Blvd.

3. Mailing Address

700 W. Hillsboro Blvd.

Suite, Apt. #, etc.

Bldg. 3 Suite 101

Suite, Apt. #, etc.

Bldg 3 Suite 101

City & State

Deerfield Beach FL

City & State

Deerfield Beach FL

Zip

33441

Country

USA

Zip

33441

Country

USA

6. Name and Address of Current Registered Agent

PAIGE, GREGORY
 700 WEST HILLSBORO BLVD.
 SUITE 101, BLDG. 3
 DEERFIELD BEACH FL 33442

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE PD
 NAME PAIGE, GREGORY L
 STREET ADDRESS 700 WEST HILLSBORO BLVD. STE 3 STE 101
 CITY-ST-ZIP DEERFIELD BCH FL 33441 ☐ Delete

TITLE S/D
 NAME FRANK LABROZZI
 STREET ADDRESS 700 W. Hillsboro Blvd Bldg 3
 CITY-ST-ZIP DEERFIELD BEACH FL 33442 Suite 101 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GREGORY L. PAIGE

MANAGING DIRECTOR

4-26-01

Daytime Phone #

954
 418-8601

CR2E034 (10/00)