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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 23 1997 8:00am Secretary of State

DOCUMENT # P96000022861 (4)

BLUEWATER COMMUNICATIONS, INC.			 	INALA MARAK KANTA ANKAR INUK ARAN
Principal Place of Business 1428 BRICKELL AVE., SECOND FLOOR MIAMI FL 33131	Mailing Address 1426 BRICKELL AVE., SEO MIAMI FL 33131-3411	OND FLOOR		JURA (1861 KRI) PANA HAJ (1881
			3. Date incorporated or Qualified 3a. 03/13/1996	. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 65 ~ 064945	Applied For
Surte, Apl. #, etc.	Suite, Apt. # etc.			Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	7ip	Country	8. This corporation has liability for intang	· ·
24 25	29]	30	Florida Statutes Yes	□ No
	Current Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
TAPLIN, JAY A 1500 SAN REMO AVE., STE. 1	220	7,43,73		
CORAL GABLES FL 33146		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 6	607 0502 and 607 1508. Florida Statut	es, the above-named con	rporation submits this statement for the purpos	se of changing its registered
office or registered agent, or both, in the	ie State of Florida, Such change was a obligations of Section 607,0505. Florida	authorized by the corpora	ation's board of directors. I hereby accept the	appointment as registered
SIGNATUDE				
Signatare, fysical or printed haine of reg		 E. Bog stered Agent signature required. 13. 	uired when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	RS AND DIRECTORS DELETE	1.1 TITUE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME TAPLIN, ANDREW S		1.2 NAME	,	
STREET ADDRESS 1428 BRICKELL AVE., S	ECOND ELOOD			
CITY-ST-ZIP MIAMI FL 33131	ECOND FLOOR	1.3 STREET ADDRESS	•	
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4. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes: I further certify that the information and cated on this annual report or suppliencental 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 of 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 Stack 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNI

SIGNING OFFICER OR DIRECTOR

1/14/97 (305) 358-840 413

time Phone #