FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025529 (4)

BLUEFIELDS INVESTMENTS GROUP, INC

FILED Jan 29 1997 8:00am Secretary of State



i isticipati nac	Mailing Address					
8478 S.W. 8TH STREET MIAMI FL 33144		8478 S.W. BTH STREET Miami Fl 33144-4153				
					3. Date Incorporated or Qualified 03/22/1996	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing A					4. FEI Number	Applied For
21		26		65-066947	8 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Cortificate of Status Desired	\$8.75 Additional	
		27	Div. 9 Chair			Fee Required
City & State		City & State	¬ '		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7.5ID			Countr	у	8. This corporation has liability for in	
24	25 29 30		30	Florida Statutes Yes No		
	9, Name and Address of Curren	nt Registered Agent		1	10. Name and Address of New Reg	istered Agent
	IDOZA, LAURA		81	Name		
8478 S.W. 8TH STREET MIAMI FL 33144			82	Street Ad	ddress (P.O. Box Number is Not Acceptable	e)
i MIAI	VII FL 33144		83	;		
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ules, the abov	re-named c	orporation submits this statement for the pu	irnose of changing its registered
office or registered agent, or 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 age			ent signature re	quired wher reinstating)	DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	D Mendoza, Laura	☐ DETEIE	11 1174 E	1		Change Addition
NAME	8478 S.W. 8TH STREET		1.2 NAME	*		
STREET ADDRESS	MIAMI FL 33144		1.3 STREE 1.4 CITY -	T ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE	21. 514		Change Addition
NAME	MENDOZA, EDEN		2.2 NAME	1		
STREET ADDRESS	8478 S.W. 8TH STREET			T ADDRESS		
CITY-ST-ZIP	MIAM) FL 33144		2. 4 CITY-			ļ
TITLE	D	DELETE	3.1 TITLE			Change Addition
NAME	MENDOZA, AILYN		3.2 NAME			
STREET ADDRESS	8478 S.W. 8TH STREET		33 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144		3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TH LE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TIFLE	ST-ZIP		Change Addition
NAME			5.1 TIFLE 5.2 NAME			Shange had tot
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			54 CITY-			
TITLE		DELETE	61 TITLE	- 12		Change Addition
NAME		_	6.2 NAME	1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			6.4 CITY -			
					· · · · · · · · · · · · · · · · · · ·	

14. I do 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 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.