PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000055512

1. Corporation Name

BLUE WATER INTERNATIONAL, INC.

FILED Feb 27, 1999 8:00 am Secretary of State 02-27-1999 90035 045 ***150.00



			···· ····· · · ·					O COLOR DE CAROLICA DE COLOR DE CAROLICA D	
Principal Place of Business Mailing Address									
4731 WEST KNIGHTS AVENUE 107 SOUTH FRANKLIN STREE			Τ						
TAMPA FL 33611 TAMPA FL 33602						DO NOT WRITE IN THIS SPACE			
					2 Date I	Incorporated or Quali		SFACE	
1						1/1996	ilou		1
s Principal D	lace of Business	2a. Mailing Address			4. FEI N			l Ar	plied For
_	ide of business	2a. Mailing Address			1	386209		<u> </u>	t Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.								\$8.75	
22 27					5. Certifo	cate of Status Desire	d 🗆	Fee Re	equired
City & State City & State						on:Campaign Financ	ing	\$5.00	Mav.Be
23 28						Fund Contribution	0.00	Added	
Zip Country Zip			Country		g. This c	corporation owes the	current year Int	angible	
24	25	29 30	5			nal Property Tax.		☐ Yes	∑ (No
24	9. Name and Address of Current				10. Name	and Address of Ne	w Registered	Agent	
			81	Name) - I - E	Heffer	e		ŀ
	ICHOLA, ROBERT R		82	Street	JOHN F	x Number is Not Acc	eptable)		_
101 EAST KENNEDY BLVD.				1000	7 S F	onklin :	S#		
SUITE 2800									
TAMPA FL 33602				0.4			···	85 Zip (ode
			84	City	tampa	•	FL	- 33	3602 L
11 Pursuant	to the provisions of Sections 607.0502	named		its this statement for	the purpose of	changing its	registered		
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, 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 objection 607.0505, Florida Statutes.									
1-17-99									
SIGNATURE	Signature, typed or printed name of registers agent	and title if applicable. (NOTE: Re	gistered Agen	t signature i	required when reinstating		DATE		
12.	OFFICERS AND	DIRECTORS	13.			IONS/CHANGES TO	OFFICERS AN		RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		YP		•	Change	Addition
NAME	HEFFERNAN, JOHN		1.2 NAME		MACE	, Stepher	•		
STREET ADDRESS	4731 WEST KNIGHTS AVENUE		1.3 STREET	ADDRESS	4601 2	en José	22/0		ľ
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST	-ZIP	Tampa	· FL	33685		
TITLE	VD	☐ DELETE	2.1 TITLE		• • • • • • • • • • • • • • • • • • •		-	☐ Change	Addition
NAME	MEYER, JEROME		2.2 NAME						
STREET ADORESS	4731 WEST KNIGHTS AVENUE		2.3 STREET	ADDRESS					
-CITY-ST-ZIP	TAMPA FL 33611		2.4 CITY-S	T-ZIP					
TITLE	STD	☐ DELETE	3.1 TITLE			•		☐ Change	Addition
NAME	HOLT, RICHARD		3.2 NAME		1				- 1
STREET ADDRESS	4731 WEST KNIGHTS AVENUE		3.3 STREET	ADDRESS					
CITY-ST-ZIP	TAMPA FL 33611		3.4. CITY-S	T-ZIP					
TITLE	VO	☐ DELETE	4.1 TITLE					☐ Change	Addition
NAME	STEPHEN M		4.2 NAME						
STREET ADDRESS	· •		4.3 STREET	ADDRESS	,			,	
CITY-ST-ZIP			4.4 CITY- ST	-ZIP					
TITLE		☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME			5.2 NAME			ì			1
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST	-ZIP					
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME		1				
STREET ADDRESS			6.3 STREET	ADDRESS)
CITY-ST-ZIP			64 CITY-ST	r-ZIP					

CITY-ST-ZIP 14. 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 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, with all other like empowered.

813.225-4288