

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000055512

1. Entity Name

BLUE WATER INTERNATIONAL, INC.

Principal Place of Business

4731 WEST KNIGHTS AVENUE
TAMPA FL 33611

Mailing Address

107 SOUTH FRANKLIN STREET
TAMPA FL 33602-5327

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3386209

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HEFFERNAN, JOHN
107 FRANKLIN ST
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name: Glenn Goldberg, Esq
Street Address (P.O. Box Number is Not Acceptable): 100 SOUTH ASHLEY DRIVE
Suite 2200
City: TAMPA FL Zip Code: 33602

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

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, 2000 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: HEFFERNAN, JOHN
STREET ADDRESS: 4731 WEST KNIGHTS AVENUE
CITY-ST-ZIP: TAMPA FL ☐ Delete

TITLE: VD
NAME: MEYER, JEROME
STREET ADDRESS: 4731 WEST KNIGHTS AVENUE
CITY-ST-ZIP: TAMPA FL 33611 ☐ Delete

TITLE: STD
NAME: HOLT, RICHARD
STREET ADDRESS: 4731 WEST KNIGHTS AVENUE
CITY-ST-ZIP: TAMPA FL 33611 ☒ Delete

TITLE: VP
NAME: MACE, STEPHEN
STREET ADDRESS: 4601 SAN JOSE
CITY-ST-ZIP: TAMPA FL ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☒ Addition
NAME: LATISHA LYNN
STREET ADDRESS: 4731 West Knights Ave
CITY-ST-ZIP: TAMPA FLORIDA 33611

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

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

TITLE: ☒ Change ☐ Addition
NAME: STEPHEN MACE
STREET ADDRESS: 4601 San Jose Dr.
CITY-ST-ZIP: TAMPA Florida 33602

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

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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:

Glenn Goldberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-18-2000 813-225-4200