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FILED
May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000058092 (3)

1. Corporation Name
BLUE ALLIGATOR, INC.

Principal Place of Business
611 SOUTHWEST 9TH STREET
HALLANDALE FL 33009

Mailing Address
611 SOUTHWEST 9TH STREET
HALLANDALE FL 33009



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1996

4. FEI Number

65-0703703

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

2a. Mailing Address

21 611 N 64 AV

26 611 N 64 AV

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 HOLLYWOOD FL

27 City & State

28 HOLLYWOOD FL

24 Zip

33024

Country

25 USA

29 Zip

33024

Country

30 USA

9. Name and Address of Current Registered Agent

SADLON, LUBOS
611 SOUTHWEST 9TH STREET
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81 Name

LUBOS SADLON, LUBOS

82 Street Address (P.O. Box Number is Not Acceptable)

611 N 64 AV.

83

84 City

HOLLYWOOD

FL

85 Zip Code

33024

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Lubos Sadlon

(NOTE: Registered Agent signature required when reinstating)

DATE

APR 28 1998

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME SADLON, LUBOS
STREET ADDRESS 611 SOUTHWEST 9TH STREET
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D ☐ DELETE
NAME BOHUSLAV, JAN
STREET ADDRESS 7830 EAST DRIVE, HARBOR ISLAND
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME SADLON, LUBOS
1.3 STREET ADDRESS 611 N 64 AV.
1.4 CITY-ST-ZIP HOLLYWOOD FL 33024

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE *Lubos Sadlon*

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CR2E034 (10/97)