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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT # P97000014892 (8)

BLUE OCEAN GROUP, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address		I 4001/1640 110 101/1 10041 009/1 401/4	BOSII OOSOI IJES BIOOI SEIKO NORF SIOI SEEL
3009 BALZEDA CORAL GABLI		3009 SALZEDO STREET CORAL GABLES FL 33134	•	DO NOT INDI	FF IN THE ODA OF
				3. Date Incorporated or Qualified	TE IN THIS SPACE
		ά ^μ	î4061	02/12/1997	
2. Principal Pi	age of Buffless	2a. Mailing Address		A. FEI Number	Applied For
21 242	"N" "Ocean Blod	26 10 DON	29406	1 65-0728358	Not Applicable
Suite, Apt	*, esc. OS	Suite, Apt. #, etc.	<u></u>	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	ed Beach FL	28 SO(4 RATON	R	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Guntry PC	70 /o C	Protein Alax	8. This corporation owes or has	
24 334	25 KBUM DUKG	29 554 7 30	r Kusi Leia	Personal Property Tax due Jur	
Od III				10. Name and Address of New F	Registered Agent
LANZ-MCENTE A- BI Name VICENTE A. LANZ					
10491:SW-15 LANE #108 82 Street Addres				dress (P.O. Box Number is Not Accept	able) // o 7
MIAMI FL 33174 83				Palmetto Cin S	# 401
			84 City	a faton	FL 85 Zip Code
11, Pursuant t	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes,	the above-named co	rporation submits this statement for the	purpose of changing its registered
office or re	aglstered agent, or both, in the State on familiar with, any accept the obligation	of Florida. Such change was auth	orized by the corpor	ation's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE X					
Signature, lyped or profiled many of registered approximation is specificable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE	D LANZ MOCNITE A	☐ DELETE	1.1 THTCE	hesident	Change Addition
NAME	LANZ, VICENTE A 10491 SW 15 LANE #108		1.2 NAME 1.3 STREET ADDRESS	958 Palmetto CM S.	#407
STREET ADDRESS	MIAMI FL 33174		0	Soca Paron FL 33	433
CITY-ST-ZIP TITLE	MIPHINI I L 00174	☐ DELETE	1.4 CITY-ST-ZIP	Las Dois Dens	☐ Change ♣ Addition
NAME			2.2 NAME	The Manual Control of	
STREET ADDRESS			2.3 STREET ADDRESS	32 RUNTING DY	
CITY - ST-ZIP			2.4 CITY - ST - ZIP	Belvan Iscous P	L 33889
TITLE		☐ DELETE	3.1 TITLE	I ROYWER	☐ Change 🙀 Addition
NAME			3.2 NAME	ELLIOT JONES	
STREET ADDRESS			3.3 STREET ADDRESS	683 Buntrag 17 Me	22444
CITY-ST-ZIP			3.4. CITY - ST - ZIP	Delvay Okean, M	- 23444
TITLE		DELETE	4.1 TITLE	servelous of	Change K Addition
NAME			4 2 NAME	sruce Rosersto 14	1-2m
STREET ADDRESS			43 STREET ADDRESS	Sit 2 With Con Bing &	22(1)/.1
CITY-ST-ZIP		The create	4.4 CITY-ST-ZIP	Derfuld Brack, Ti	- Jyyy/
TITLE		☐ DELETE	5.1 TITLE	•	☐ Change ☐ Addition
NAME OTREET ADODESC			5.2 NAME		
STREET ADDRESS		ľ	5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		hand Occord	6.2 NAME		in orango in radicon
STREET ADDRESS			6.3 STREET ADDRESS		İ
CITY-ST-ZIP			6.4 CITY-SI-ZIP		1
	artify that the information number of suit	b this Live slage not small for th		in Cootion 110 07/9Vi) Florida Statutas	I feetbas partify that the information

ring by certify that the information supplied with this little information stated in section 119.07(3)(i), Florida Statutes. 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 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 Block 13 if changed, or of an attachment with an address.