

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90153 008 \*\*\*150.00

DOCUMENT # P97000069925

1. Corporation Name  
BLUE CLIFF, INC.

Principal Place of Business  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

Mailing Address  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1997

4. FEI Number

65-0776670

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 the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

RICHARDS, TIMOTHY D ESQ.  
2665 S. BAYSHORE DRIVE  
SUITE 703  
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name  
World Corporate Services, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)  
2665 South Bayshore Drive

83 Suite 703

84 City  
Miami

FL

85 Zip Code

33133

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

*Timothy D. Richards*  
Signature, typed or printed name of registered agent and title if applicable.

Timothy D. Richards,

1-14-99

DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P/D  
BELSOL, JOSE MANUEL  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S/D  
AYALA, RAFAEL  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GUILLÉN, MANUEL  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
RICHARDS, TIMOTHY D RSO  
2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

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

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

AS  
Timothy D. Richards, Esq.  
2665 South Bayshore Drive, STE 703  
Miami, Florida 33133

☐ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE:

*Timothy D. Richards*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Timothy D. Richards, Esq., AS

01/14/99

Date

Daytime Phone #

CR2E034 (11/98)