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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000084558

BLUE LINCOLN CORP.

	•			
Principal Place of Business	•		Mailing Address	
11318 SW 147TH COURT MIAMI FL 33196			11318 SW 147TH COURT MIAMI FL 33196	•

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90014 018 ***150.00



Principal Plac	ce of Business	Ma	iling Address				1 100 H 0 0 1				B1161 811 881	
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2. Principal Place of Business 2a. Mailing Address			.			09/30/199 4. FEI Number				plied For	┨	
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Suite, Apt.	# etc		Suite, Apt. #, etc.			•	007079240	ງວ			Additional	3
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 1	9. Name and Address of Co		ered Agent		T		10. Name and A	ddress of New I	Registered	Agent	,*	
			St. No.		81	Name						
	RNICK, MARIA				82	Stroot Addr	ress (P.O. Box Numb	ner is Not Assent	able)			1
^{©1,©} 113'	18 SW 147TH COURT				62	Street Addi	ress (F.O.,DOX Hullic	Del is ivol Accept	abie)			
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11. Pursuant	to the provisions of Sections 607	7:0502 and 60	7.1508, Florida Statu	ites, the a	bove	-named corp	poration submits this	statement for the	purpose of	f changing its	registerea	1
	to the provisions of Sections 607 registered agent, or both, in the Section familiar with, and accept the company of the compa						poration submits this on's board of director	statement for the rs. I hereby acce	purpose of pt the appo	f changing its intment as re	registered gistered	
agent. I a	am familiar with, and accept the c						poration submits this on's board of director	statement for the rs. I hereby acce	purpose of pt the appo	f changing its intment as re	registered gistered	
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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: