

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000054341

Entity Name: BLUE WAVE DESIGN, INC.

FILED  
Mar 19, 2008  
Secretary of State

## Current Principal Place of Business:

824 US HWY ONE, #345  
NORTH PALM BEACH, FL 33408

## New Principal Place of Business:

## Current Mailing Address:

824 US HWY ONE, #345  
NORTH PALM BEACH, FL 33408

## New Mailing Address:

FEI Number: 65-0928328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARKES, EVELYN F CPA PA  
420 CLEMIDTIS ST 2ND FL  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

PARKES, EVELYN F CPA PA  
420 CLEMATIS ST 2ND FL  
WEST PALM BEACH, FL 33401 US

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:

03/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILKINS, EILEEN M  
Address: 824 US HWY ONE, STE 345  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: V ( ) Delete  
Name: O'BRIEN, SHANE  
Address: 824 US HWY ONE, STE 345  
City-St-Zip: NORTH PALM BEACH, FL 33408

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EILEEN WILKINS

P

03/19/2008

Electronic Signature of Signing Officer or Director

Date