

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90032 050 ***150.00

DOCUMENT # P99000091856

1. Entity Name
BLUE HOUSE, INC.

Principal Place of Business
 126 E. Jefferson Street
 Orlando, FL 32801

Mailing Address

C0042101

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
126 E. Jefferson St.

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc.

City & State
Orlando, FL

City & State

4. FEI Number
59-3613047

Applied For
 Not Applicable

Zip **32801** Country **USA** Zip Country
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

J. Bennett Grocock, P.A.
126 E. Jefferson Street
Orlando, FL 32801

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D/S/T** Delete
 NAME **Henk VanDijk**
 STREET ADDRESS **126 E. Jefferson St.**
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D/P** Delete
 NAME **Steven F. Guicherit**
 STREET ADDRESS **126 E. Jefferson Street**
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

 **Steven F. Guicherit, Pres.**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)