


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2008 08:00 AM
Secretary of State

DOCUMENT # S83406 1. Entity Name BLUE OCEAN INVESTMENTS, CORP.	
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Principal Place of Business 6780 CORAL WAY 200 MIAMI, FL 33155 US	Mailing Address C/O BERTHA FERNANDEZ 8819 FROUDE AVE MIAMI BCH, FL 33154 US
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DO NOT WRITE IN THIS SPACE



05022008 No Chg-P CR2E034 (11/05)

4. FEI Number 58-1987520	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FERNANDEZ, BERTHA 8818 FROUDE AVENUE SURFSIDE, FL 33154

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)


U000000950005
06/03/08-80051-020-150.00

FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGUILA, ADOLFO Z. 6780 CORAL WAY SUITE 200 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FERNANDEZ, BERTHA 8819 FROUDE AVE MIAMI BCH, FL 33154
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/30/08** **305 868 3638**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #