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

PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # \$88044



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

Katherine Harris

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90099 031 ***150.00

BLUE PENGUIN, INC.								
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Principal Plac	e of Business	Mailing Address				\$ IMPRIMED (9) IMPER 19111 BANKS ANDRE 91 DE DEDEN I		IBIT BIBIT BIBIT 1981
2408 W. KENNEDY BLVD. 5305 N ARMENIA AVE TAMPA FL 33609 TAMPA FL 33603								
US US						DO NOT WRITE IN THIS	SPACE	
					Ī	3. Date Incorporated or Qualifed		
i					ļ	10/18/1991		,
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21 26						59-3090042		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.7	5 Additional
27						5. Certifcate of Status Desired Fee Required		
City & State City & State						6. Election Campaign Financing	\$ 5.	00 May Be
23						Trust Fund Contribution		ed to Fees
Zip	Zip Country Zip C			Country		8. This corporation owes the current year In	tangible	
24	25	29 30)			Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent	
			8	Name				
DIAZ, JOSEPH L.			82	Stroot	Address (P.O. Box Number is Not Acceptable)			
2522 WEST KENNEDY BLVD.			64	Jueer	Addies	S (F.O. Box Number 18 Not Acceptable)		
TAM	IPA FL 33609		83	3				
ļ			L.	<u> </u>				
			84	1 City		FL	85	Žip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				 /e-named	corpor	ation submits this statement for the nurnose of	changin	its registered
) office or t	registered agent or both in the State o	r Flonda. Such change was autr	iorizea bi	v tne corb	oration'	s board of directors. I hereby accept the appo	intment a	s registered
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statute	ş.				
SIGNATURE	Signature, typed or printed name of registered agent	(NOTE: Be		est signature	roquirod w	then reinstating) DATE		
12.	OFFICERS AND		13.	- agnotare	- oqui oo 17	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTORS IN 12
TITLE	VSPD	☐ DELETE	1.1 TITLE	_			☐ Cha	
NAME	OSTEEN, EUGENE	_	1.2 NAME					
	2408 W KENNEDY BLVD		•	T ADDRESS				
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NAME			4. 2 NAME	•		•		
STREET ADDRESS			4.3 STRE	ET ADDRESS		_		ł
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	<u> </u>			
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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 charges or on an attachment with an address, with all other like empowered.

SIGNATURE: