


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # N13367
1. Entity Name
MIAMI BAYSIDE FOUNDATION, INC.



Principal Place of Business Mailing Address
3399 SW 3RD AVE 3399 SW 3RD AVE
MIAMI, FL 33145 US MIAMI, FL 33145 US

DO NOT WRITE IN THIS SPACE



04262006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2834504	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FAIR, T W
8500 NW 25TH AVE
MIAMI, FL 33147

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MONZON-AGUIRRE, ESTHER 3399 SW 3RD AVE MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C FAIR, T. W. 8500 NW 25TH AVE MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WYNN, DWAYNE A 645 N.W. 62ND ST MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FRAZIER, RONALD E. 2125 BISCAYNE BLVD. SUITE 330 MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEIDENER, MAGGIE 10418 N.W. 31ST TERR. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAMS, GAIL 2100 NW 86 TERR MIAMI, FL 33147

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05/18/06-80059-018 70.00

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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 617, 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: *Esther Monzon Aguirre* 5/1/06 305-926-5552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #