

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Bandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **N95000003665 (5)**

1. Corporation Name  
**BAILES FERRER, INC.**



Principal Place of Business*	Mailing Address
ATTN: D. I. FERRER 10 FLEMING COURT FT. LAUDERDALE FL 33326	ATTN: D. I. FERRER 10 FLEMING COURT FT. LAUDERDALE FL 33326

3. Date Incorporated or Qualified  
**08/02/1995**

4. FEI Number  
**65-0628023**

Applied For	Not Applicable
-------------	----------------

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?  Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**FERRER, DAMARIS I  
10 FLEMING COURT  
FT. LAUDERDALE FL 33326**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number Is Not Acceptable)	
83	
84 City	<b>FL</b>
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD FERRER, DAMARIS I 10 FLEMING COURT FT. LAUDERDALE FL 33326	1.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	Francisco Lugovina
STREET ADDRESS		1.3 STREET ADDRESS	1255 N. Ave building B #3R
CITY-ST-ZIP		1.4 CITY-ST-ZIP	New Rochelle, NY 10804
TITLE	VSD KIM, ALLEN W 10 FLEMING COURT FT. LAUDERDALE FL 33326	2.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Adela Green
STREET ADDRESS		2.3 STREET ADDRESS	16571 Blatt Blvd
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Weston, FL 33326
TITLE	D SANTANA, NOEMI 3435 GILES PL #5L BRONX NY 10463	3.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Rima Robbins
STREET ADDRESS		3.3 STREET ADDRESS	2 St. Andrews Court
CITY-ST-ZIP		3.4 CITY-ST-ZIP	St. Augustine, FL 32084
TITLE	O AUSTIN, FRANCESCA 1451 SOUTHWEST 75 TERRACE PLANTATION FL 50	4.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Olga Perez Martinez
STREET ADDRESS		4.3 STREET ADDRESS	2166 Matthews Ave #7H
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Bronx, NY 10461
TITLE	O KATZ, SUZANNE 1451 SOUTHWEST 75 TERRACE PLANTATION FL	5.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Michael Greenberg
STREET ADDRESS		5.3 STREET ADDRESS	2 St Andrews Court
CITY-ST-ZIP		5.4 CITY-ST-ZIP	St Augustine, FL 32084
TITLE	O VALE ZUELA, TONO 12343 SOUTHWEST 11 ST PEMBROKE PINES FL	6.1 TITLE	<i>Board Member</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Romulo Fernandez
STREET ADDRESS		6.3 STREET ADDRESS	870 Golfview Dr
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Weston, FL 33326

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Damaris P. Ferrer*

*1/31/98*

CFR2037 (1097)