

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90160 010 ****61.25

DOCUMENT # N95000003665 1. Entity Name BAILES FERRER, INC.					
Principal Place of Business 8452 STATE RD. 84 FORT LAUDERDALE, FL 33324			Mailing Address 8452 STATE RD. 84 FORT LAUDERDALE, FL 33324		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0628023	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERRER, DAMARIS I 750 SOUTHWIND CR. SUNRISE, FL 33326				7. Name and Address of New Registered Agent Name Ferrer, Damaris I Street Address (P.O. Box Number is Not Acceptable) 16030 La Costa Dr City Weston FL Zip Code 33326	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTDD FERRER, DAMARIS I 750 SOUTHWIND CR SUNRISE, FL 33326	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANDON, CELIA M 3620 NW 104 AVE. CORAL SPRINGS, FL 33067	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANTANA, NOEMI 3435 GILES PL #5L BRONX, NY 10463	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROULETTE-BOGUS, YVETTE 320 NW 107 AVE. CORAL SPRINGS, FL 33071	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM LUGOVINA, FRANCISCO 1255 N AVE BLDG B #3R NEW ROCHELLE, NY 10804	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM Junia Overton 1387 SW 7th St Boca Raton, FL 33486	☐ Delete			
12. 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 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 <u>Damaris Ferrer</u> Date <u>4/30/05</u> Daytime Phone # <u>754-775-2298</u>					