FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

COR ANNU	PORATION JAL REPORT	Sandra Secret	ARIMENT OF STATE B. Mortham ary of State CORPORATIONS		
1. Corporation	MENT # P940 BAY, INC.	000030227 (0))		
UNI AW	IDAT, INO			 	
Principal Place	of Business	Mailing Address			
2102 NE 36T OCALA FL 3		2102 NE 36TH AVE. OCALA FL 34470			
				3. Date Incorporated or Qualified 04/19/1994	3a. Date of Last Report 06/06/1995
2. Principal Pla 21	nce of Business	2a. Mailing Address	OE 36MAUE	4. FEI Number 59-3234581	Applied For Not Applicable
Suite, Apt. #		E Suite, Apt #, etc.	SUA MYS	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	1 0 0 0	Oity & State		6. Election Campaign Financing	\$5.00 May Be
23 <u>C</u> C	Country Country	A [28] DCA19	F LURIDA Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
24 344	70 25 MARIO	N 29 34470	30 MAY100N	Florida Statutes Yes	s [] No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New	Registered Agent
PATEL	KUNJBALA C		1 1 1	PATEL NILL	₹
2102 NE 36TH AVE.		82 Street Addr	ess (P.O. Box Number is Not Accepta 2102 NE 3675	AVE	
OCALA	FL 34470		83	Dode.	
			0	7 C 400E4	
			84 City	00.10	85 Zip Code
11. Pursuant to	o the provisions of Sections 607.0	0502 and 607.1508. Florida Statute	es, the above named cornor	Ocala ation submits this statement for the pu	FL 34476
11. Pursuant to or registere familiar with	o the provisions of Sections 607.0 ad agent, or both, in the State of f h, and acoupt the obligations of S	0502 and 607,1508, Florida Statute Florida Such change was authorizi Section 607,0505, Florida Statutes	es, the above named cornor		FL 34476
11. Pursuant to or registere familiar with SIGNATURE	ed agent, or both, in the State of the and accept the obligations of S	Florida Such change was authorize Section 607,0505, Florida Statutes	as, the above named corpored by the corporation's boar	ation submits this statement for the pured of directors. I hereby accept the app	FL 34476
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or or an attachment with an address

Deta

SIGNATURE: SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

Daytine Phone ≠

CR2E034 (12/95)