

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sanetra B. Morgan
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
JUN 29 1995

95 JUN 29 AM 8:07

DOCUMENT # **P94000034419 (9)**

1. Corporation Name
1639 BAYSHORE CORP.

Principal Place of Business

**755 NW 28TH STREET
MIAMI FL 33127**

Mailing Address

~~**755 NW 28TH STREET
MIAMI FL 33127**~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/06/1994** 3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip Country

2a. Mailing Address

26 **PO Box 140067**

27 Suite, Apt. #, etc.

29 **33114-0067** 30 **USA**

4. FEI Number **65-0501493** Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**PARENT, DOUGLAS R
755 NW 28TH STREET
MIAMI FL 33127**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature (Print or printed name of registered agent and the corporation)

(Date) (Printed Agent Signature Required when registering)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, ST, ZIP
D/P	PARENT, DOUGLAS R	755 NW 28TH STREET	MIAMI FL 33127

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, ST, ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for this exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted 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 13, if changed, or on an attachment with an address.

SIGNATURE:

Douglas R. Parent
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
DOUGLAS R. PARENT, President

4/28/95 (305) 858-2079
DATE (Printed Name)