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FILED

Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18693 (4)

1. Corporation Name

THE BAYSIDE MERCHANTS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% BAYSIDE CENTER MANAGEMENT OFFICE
R-106
MIAMI FL 33132
US% BAYSIDE CENTER MANAGEMENT OFFICE
R-106
MIAMI FL 33132
US3. Date Incorporated or Qualified
01/12/19873a. Date of Last Report
03/01/1996

2. Principal Place of Business

2a. Mailing Address

21 C/O BAYSIDE MARKETPLACE

26 C/O BAYSIDE MARKETPLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 R-106, 401 BISCAYNE BLVD.

27 R-106, 401 BISCAYNE BLVD.

City & State

City & State

23 MIAMI, FLORIDA

28 MIAMI, FLORIDA

Zip

Country

Zip

Country

24 33132

25 USA

29 33132

30 USA

4. FEI Number

59-2852253

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TERCILLA, RAUL D.
BAYSIDE CENTER, MANAGEMENT OFFICE
401 BISCAYNE BLVD., SUITE R-106
MIAMI FL 33132

81 Name

TERCILLA, RAUL D.

82 Street Address (P.O. Box Number is Not Acceptable)

BAYSIDE MARKETPLACE

83

401 BISCAYNE BLVD., SUITE R-106

84 City

MIAMI

FL

85 Zip Code

33132

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME BUGLINO, PHIL
STREET ADDRESS 401 BISCAYNE BLVD.
CITY - ST - ZIP MIAMI FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIPTITLE VP ☒ DELETE
NAME WOODALL, HARDY
STREET ADDRESS 401 BISCAYNE BLVD.
CITY - ST - ZIP MIAMI FL2.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition
2.2 NAME CALLEJA, EMILIO
2.3 STREET ADDRESS 401 BISCAYNE BLVD.
2.4 CITY - ST - ZIP MIAMI, FL 33132TITLE SD ☐ DELETE
NAME TERCILLA, RAUL D.
STREET ADDRESS 401 BISCAYNE BLVD.
CITY - ST - ZIP MIAMI FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIPTITLE T ☒ DELETE
NAME HAKIM, JOSEPH
STREET ADDRESS 401 BISCAYNE BLVD.
CITY - ST - ZIP MIAMI FL4.1 TITLE TREASURER ☒ Change ☐ Addition
4.2 NAME WOODALL, HARDY
4.3 STREET ADDRESS 401 BISCAYNE BLVD.
4.4 CITY - ST - ZIP MIAMI, FL 33132TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Phil BuglinoDate 1/20/97 577-3344
Daytime Phone # 0078348

CR2E037 (9/96)