

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000073508

**Entity Name:** BAIRE'S FLY S.A. CORP**Current Principal Place of Business:**200 SUNNY ISLES BLVD.  
SUITE 2-1602  
SUNNY ISLES BEACH, FL 33160**Current Mailing Address:**200 SUNNY ISLES BLVD.  
SUITE 2-1602  
SUNNY ISLES BEACH, FL 33160 US**FEI Number:** 30-0796219**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IC CONSULTING SERVICES INC.  
8905 NW 28TH DR  
UNIT A  
CORAL SPRINGS, FL 33065 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	GRANDE, LUIS A
Address	200 SUNNY ISLES BLVD. SUITE 2-1602
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	VP
Name	GRANDE, MARIA B
Address	200 SUNNY ISLES BLVD. SUITE 2-1602
City-State-Zip:	SUNNY ISLES BEACH FL 33160

Title	TREASURER
Name	FERNANDEZ, MAYRA
Address	200 SUNNY ISLES BLVD. SUITE 2-1602
City-State-Zip:	SUNNY ISLES BEACH FL 33160

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIS A. GRANDE

PRESIDENT

04/24/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date