Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90028 044 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	666670
DOCUMENT	••	000073

1. Corporation Name

BAYSHO	res real estate, inc.									
Principal Place	of Business	M	lailing Address					- I PERILE BEITH BERTE ATTENDER TOREN DECEMBER A		\$1\$11 \$1211 1001
3656 61ST WAY ST PETERSBURG FL 33710 US 3656 61ST WAY ST PETERSBURG FL 33710 US						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed				
			Mailian Adduses					04/14/1980 4. FEI Number		Applied For
— ·	ace of Business		Mailing Address					59-1997721	<u> </u>	Not Applicable
21	#	26	Suite, Apt. #, etc.							Additional
Suite, Apt.	#, etc.	27	Suite, Apr. #, etc.	-				5. Certificate of Status Desired	. - · · · -	Required
City & State)		City & State					6. Election Campaign Financing		May Be
23		28						Trust Fund Contribution		d to Fees
Zip	Country	L	Zip		Country			8. This corporation owes the current year Int		No.
24	25	29		30				Personal Property Tax.	Yes	⊠ No
	9. Name and Address of Curren	t Regi	stered Agent		81	T N		10. Name and Address of New Registered	Agent	
LACE	YEN WEARIETLI				81	Nam	e			
	(EY, KENNETH				82	Stree	t Addre	ess (P.O. Box Number is Not Acceptable)		
	61ST WAY				<u> </u>					
SIP	ETERSBURG FL 33710				83					
					84	City		FL	85 Zip	Code
office or re agent. I as	to the provisions of Sections 607.030 gistered agent, or both, in the State in familiar with, and accept the obligat Signature, typed or printed name of registered ager	of Flori tions o	f, Section 607.0505, Flo	nida S	ized by Statutes	the coi	poratio	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoint when reinstating)	Timoni as	
12.	OFFICERS AN	D DIR		_1:	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PDC		☐ DELETE	1	,1 TITLE				[] Change	e
NAME	LACKEY, KENNETH			1.2 NAME						
STREET ADDRESS			1	1.3 STREET ADDRESS		s			}	
CITY-ST-ZIP	ST PETERSBURG FL				1.4 CITY-ST-ZIP				☐ Change	e Addition
TITLE	STD		☐ DELETE		2.1 TITLE				Criang	- Li Addison
NAME	LACKEY, SUZETTE				.2 NAME					,
STREET ADDRESS	3656 61ST WAY N			_ 11.	.3 STREE		S			-
CITY-ST-ZIP	ST PETERSBUG FL			_	2. 4 CITY-5	ST-ZIP	+		Change	e Addition
TITLE			☐ DELETE		3.1 TITLE					
NAME					3.2 NAME		_			
STREET ADORESS					3,3 STREE		S			
CITY-ST-ZIP			☐ DELETE		8.4. CITY- 5 1.1 TITLE	ST-ZIP	+		Chang	e Addition
TITLE			CT DECE 15							
NAME					I. 2 NAME					
STREET ADDRESS	•				L3 STREE		٦			
CITY+ST-ZIP			DELETE	_	1.4 CITY-5 5.1 TITLE	1-21	+		[] Chang	e
TITLE .				- 1	5.2 NAME					_
NAME STREET ADDRESS				- 1	5.3 STREE	T ADDRES	s			
					5.4 CITY-9					ì
CITY-ST-ZIP			☐ DELETE	_	5.1 TITLE				Chang	e
NAME			<u> </u>	6	3.2 NAME					·

CITY-ST-ZIP 14. 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 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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

727-866-6695