


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

FILED

Jan 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000001883 (4)

1. Corporation Name

BAY AREA PIGGYBACK, INC.

Principal Place of Business  
560 LENNON LN  
WALNUT CREEK CA 94598

Mailing Address  
560 LENNON LN  
WALNUT CREEK CA 94598

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
04/11/1997

4. FEI Number  
94-2286648

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

ARANGO, ALVARO  
6885 NW 25TH ST BAY #5  
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name  
Gloria Lotero-Rushton  
82 Street Address (P.O. Box Number is Not Acceptable)  
6885 NW. 25th St. Bay #5  
83 Miami, FL 33122  
84 City  
Miami, FL 85 Zip Code  
33122

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

*Gloria Lotero-Rushton*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-08-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	1.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRANCIS, JAMES L	1.2 NAME	Gerald A. Francis
STREET ADDRESS	1670 SARGENT RD	1.3 STREET ADDRESS	1690 Sargent Rd.
CITY-ST-ZIP	CONCORD CA 94518	1.4 CITY-ST-ZIP	Concord, CA 94518
TITLE	DCP <input type="checkbox"/> DELETE	2.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRANCIS, GEORGE W	2.2 NAME	Eleanor Merritt
STREET ADDRESS	1261 BERMUDA CT	2.3 STREET ADDRESS	23585 W. 207th St.
CITY-ST-ZIP	CONCORD CA 94518	2.4 CITY-ST-ZIP	Spring Hill, KS 66083
TITLE	DST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANCIS, MYRNA J	3.2 NAME	
STREET ADDRESS	1670 SARGENT RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	CONCORD CA 94518	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE: *Gloria Lotero-Rushton* SIGNATURE REQUIRED

510-932-1313

CR2E094 (10/97)