

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 28 PM 5:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G70845

(4)

1. Corporation Name

BAJALIA MARKETING, INC.

Principal Place of Business

624 BEAUTYREST AVE.
JACKSONVILLE FL 32205
US

Mailing Address

1260 S. MCDUFF AVENUE
JACKSONVILLE FL 32205-0071
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/12/1984

3a. Date of Last Report

04/21/1994

4. FEI Number

59-2353507

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BAJALIA, AUDI G.
1260 S. MCDUFF AVE.
JACKSONVILLE FL 32205

1. Name

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

3.

4. 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

Audi G. Bajalia

(NOTE: Registered agent signature required when reappointing)

DATE

3-6-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DPS	BAJALIA, AUDI G.	1260 S. MCDUFF AVE.	JACKSONVILLE FL
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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1. NAME	2. STREET ADDRESS	3. CITY - ST - ZIP	4. DATE	5. CHANGE	6. ADDITION
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1. NAME	2. STREET ADDRESS	3. CITY - ST - ZIP	4. DATE	5. CHANGE	6. ADDITION

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I certify that the information indicated on this annual report or supplemental annual report only; 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 amendment to this address.

I do not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report only; 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 amendment to this address.

SIGNATURE:

Audi G. Bajalia

AUDI G. BAJALIA

3-6-95

Date

(Signature) (Typed Name)