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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State

FILED

Mar 02 1998 8:00am

DOCU 1. Corporation	MENT	# J1869	99	(5)								
		IS BAY, INC.		` '								
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Principal Plac	e of Busines	S	Mai	iling Address				* 100	IEI 21001 IOING DING IDING	18 4 E E I UII	114 0 1044 01011 01	ANT REDIT THE
700 N.W. 107TH AVE				700 N.W. 107TH AVE								
4TH FLOOR MIAMI FL 33				4TH FLOOR MIAMI FL 33172				DO NOT WRITE IN THIS SPACE				
	// F		7971	INIMI TE OUTTE				3. Date Incorp	orated or Qualified			
								06/10/19	986			
2. Principal Place of Business			2a.	2a. Mailing Address				4. FEI Numbe				pplied For
21	# =1=			26 Suite And Heate				59-269	91586		- + t - t -	lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of	of Status Desired		, -	Additional Regulred
City & State				City & State				6. Election Ce	mpalgn Financing) May Be
23			28	28				1	Contribution			to Fees
Zip	Country			Zip		Country		8. This corpor	ation owes or has p	aid the cu		
24	25			29 30					operty Tax due Jun			□ No
		and Address of Cur	rent Hegiste	ered Agent		81	Name	10. Name and	Address of New R	egistered	Agent	
WATSKY, MORRIS J., ESO.					į	82						
700 NW 107TH AVENUE MIAMI FL 33172							Street Add	ress (P.O. Box Nun	nber is Not Accepta	able)		
1711	Mill I E 001	, <u></u>			Ì	83						
					}	84	City				les 7in	Code
							City			FL	85 Zip	C008
11. Pursuant	to the provisi	ons of Sections 607.0	502 and 60	7.1508, Florida State	utes, the ab	ove-	named corp	poration submits the	is statement for the	purpose o	of changing i	its registered
agent. I a	ım familiar wil	ent, or both, in the Stath, and accept the ob-	ligations of,	Section 607.0505,	Florida Statu	tes.	ino corporar	morra board or one	ciolo, i ridioby acci	opt the up	politilition ac	, rogistorou
SIGNATURE	Name to the same			- de la	OTE Desistered					DATE		
12.	Signature, typed or printed name of registered ag OFFICERS AN			AND DIRECTORS			it signature requi	red when reinstating) ADDITIONS/0	CHANGES TO OFF		D DIRECTO	RS IN 12
TITLE	DC			DELETE	1.1 TIT	Æ					Change	Addition
NAME		LEONARD			1.2 NAJ	ΜE						
STREET ADDRESS							NDDRESS					
CITY-ST-ZIP	MIAMI F	L			1.4 CIT		- ZIP					
TITLE	VD BOLOTIN, IRVING			DELETE		2.1 TITLE 2.2 NAME					L Change	Addition
NAME Street address	700 NW 107TH AVE						ADDRESS					
CITY-ST-ZIP	MIAMI F				2.4 CD							
TITLE	P			DELETE	3.1 TITE	_					Change	Addition
NAME	MILLER,	STUART A.			3.2 NA	Æ	ŀ					
STREET ADDRESS	700 NW	107TH AVE			3.3 STR	EET A	DDRESS					
CITY-ST-ZIP	MIAMI F	L			3.4. C(1		- ZIP					
TALE	AS	F 1/47111 FFM		DELETE	4.1 T(T)						L Change	Addition
NAME		E. KATHLEEN 107TH AVE			4.2 NA							
STREET ADDRESS	MIAMI F						DDRESS					, ,
CITY-ST-ZIP TITLE	SD	<u> </u>		DELETE	4.4 CIT 5.1 TITE		5	,			Change	Addition
NAME	COLE, ROBERT B.			T	5.2 NAME		Per	Lor, J. Alla	AD.			
STREET ADDRESS	· ·	107TH AVE			1		DORESS 70	O NW. I	O7 Avenu	و		•
CITY-ST-ZIP	MIAMI F				5.4 CiT	ر ST۰		liami, F	L 33177	<u>}</u>		
TITLE	TV			DELETE	6.1 TITI			_			Change	Addition
NAME	SALEDA			/ >	6.2 NAM		M	alcolm,	Waynew 107 Ave 3317	right	7	✓ `
STREET ADDRESS		107TH AVE					DDRESS 70	i win ox	107 Ave.	~ ´		
CITY-ST-ZIP	MIAMI F	L			6.4 CIT	(-ST-	·ZIP /\/	Miami, t	こと こうつじん	~2		

14. I hereby certify that the information supplied with this filing does indicated on this annual report or supplemental annual report is officer or director of the corporation or the receiver or dustee of Block 12 or Block 13 if changed, or on an attachmen with an acceptance. not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appear to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in