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

May 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # K17100 BAYLABO, INC. Principal Place of Business Mailing Address 2001 10TH AVE N STE 9 2001 10TH AVE N STE 9 LAKE WORTH FL 33461 LAKE WORTH FL 33461 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/29/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0049911 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23  $\Gamma$ Added to Fees 28 Trust Fund Contribution Zip Country  $Z_{1D}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LABAY, JACK aboy Jack Street Address (P.O. Box Number is Not Acceptable) 1126 N "K" ST 82 LAKE WORTH FL 33460 83 Zip Code ake Worth 7 1508, Fiorida Statutos, the above-named corporation submits this statement for the purpose of changing its registered a Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered Suction 607,0505, Florida Statutes. 11. Pursuant to the previous office or registered a Jack Labor SIGNATURI OFFICERS AND DIRE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 11116 Change TITLE ÞD LABAY, JACK NAME 1.2 NAME LaBay, Jack 1126 N "K" ST STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 1.4 CiTY-ST-ZIP DELETE Change ☐ Addition TITLE 21 HILE NYE. WILLIAM A. NAME 2.2 NAME **644 SPRINGDALE CIRCLE** STREET ADDRESS 23 STREET ADDRESS PALM SPRINGS FL CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition 3.11011E TITLE GOLD, BILL NAME 3.2 NAME 110 N 19 AVENUE STREET ADDRESS 3.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 Till F NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-S1-ZiP DELETE Change ☐ Addition TITLE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 64 CHY-ST-7P with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. I further certify that the information ital any 0 if report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an easy of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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with an address.

**FILED**