

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

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Leandra B. McLean  
Secretary of State  
Division of Corporations

**DOCUMENT # K66804**

1. Corporation Name:

**BAYVIEW DRIVE, INC.**

**(1)**

APPROVED  
AND  
FILED

JUN 1 AM 9:39

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

104180 O/S HWY.  
KEY LARGO FL 33030  
US

104180 O/S HWY.  
KEY LARGO FL 33030  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt. # 100

26 Suite Apt. # 100

22 City & State

27 City, & State

23 Apt.

28 City

24 County

29 Zip

25 Country

30 Country

9. Name and Address of Current Registered Agent

CABRERA, RAUL D.  
4201 S.W. 11TH STREET  
MIAMI FL 33134

81 Name

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

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 6017.0602 and 6017.1908, 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 6017.0608, Florida Statutes.

SIGNATURE

4/30/95

12. OFFICERS AND DIRECTORS

NAME: D  
AZPIRI, LORENZO  
1061 N. VENETIAN DRIVE  
MIAMI FL

NAME: D  
AZPIRI, RACHEL  
1061 N. VENETIAN DRIVE  
MIAMI FL

NAME:  
STREET ADDRESS:  
CITY, STATE:

I, the undersigned, declare under penalty of perjury that the information supplied with this filing is, to the best of my knowledge and belief, true and correct, that the information indicated on the annual report or supplemental annual report is true and accurate, and that my signature shall have the same legal effect as if my signature were affixed to the original or copies of the corporation's report or other documents referred to therein or thereto, and that my signature is affixed to this document in my capacity as the officer or director indicated on the attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/95 (305) 579-1182