

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

| CORPORATION<br>ANNUAL REPORT<br>1995                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <br>FLORIDA DEPARTMENT OF STATE<br>Sandra B. Matham<br>Secretary of State<br>DIVISION OF CORPORATIONS |                                                                                                                                                                                                                                                                                                                                                                                 | FILED<br>SECRETARY OF STATE<br>DIVISION OF CORPORATIONS<br>95 JAN 17 AM 11:11                                                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--|
| DOCUMENT # L13697 (2)<br>1. Corporation Name<br>BAY PALM ENTERPRISES, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                  |  |
| Principal Place of Business<br>7261 S.W. 131 STREET<br>MIAMI FL 33156                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Mailing Address<br>7261 S.W. 131 STREET<br>MIAMI FL 33156                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                 | DO NOT WRITE IN THIS SPACE                                                                                                                       |  |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 2a. Mailing Address<br>26 Suite, Apt. #, etc.                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                 | 3. Date Incorporated or Qualified<br>09/06/1989                                                                                                  |  |
| 22 City & State<br>23 Zip Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 27 City & State<br>28 Zip Country                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                 | 3a. Date of Last Report<br>09/26/1994                                                                                                            |  |
| 24                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 25                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                 | 29                                                                                                                                               |  |
| 26                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 27                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                 | 28                                                                                                                                               |  |
| 29                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | 30                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                 | 31                                                                                                                                               |  |
| 9. Name and Address of Current Registered Agent<br>PAPPALARDO, ANTHONY<br>7261 S.W. 131 STREET<br>MIAMI FL 33156                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                 | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 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 _____ (Signature) _____ (Printed Name of Registered Agent and Title of Corporation) _____ (Date)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                  |  |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                        | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                  |  |
| 12.1 NAME<br>12.2 STREET ADDRESS<br>12.3 CITY, ST, ZIP<br>12.4 TITLE<br>12.5 NAME<br>12.6 STREET ADDRESS<br>12.7 CITY, ST, ZIP<br>12.8 TITLE<br>12.9 NAME<br>12.10 STREET ADDRESS<br>12.11 CITY, ST, ZIP<br>12.12 TITLE<br>12.13 NAME<br>12.14 STREET ADDRESS<br>12.15 CITY, ST, ZIP<br>12.16 TITLE<br>12.17 NAME<br>12.18 STREET ADDRESS<br>12.19 CITY, ST, ZIP<br>12.20 TITLE                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                        | 13.1 NAME<br>13.2 STREET ADDRESS<br>13.3 CITY, ST, ZIP<br>13.4 TITLE<br>13.5 NAME<br>13.6 STREET ADDRESS<br>13.7 CITY, ST, ZIP<br>13.8 TITLE<br>13.9 NAME<br>13.10 STREET ADDRESS<br>13.11 CITY, ST, ZIP<br>13.12 TITLE<br>13.13 NAME<br>13.14 STREET ADDRESS<br>13.15 CITY, ST, ZIP<br>13.16 TITLE<br>13.17 NAME<br>13.18 STREET ADDRESS<br>13.19 CITY, ST, ZIP<br>13.20 TITLE |                                                                                                                                                  |  |
| 14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.017(3)(b), 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 registered or limited company to which this report is required by Chapter 017, Florida Statutes, and that my name appears in Block 1, 2, or Block 13 of this filing, or on an attachment with an address. |  |                                                                                                                                                                                        | 15. SIGNATURE AND PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR<br>ANTHONY PAPPALARDO<br>1/9/95                                                                                                                                                                                                                                                                               |                                                                                                                                                  |  |