

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L53638

FILED
Apr 27, 2006
Secretary of State

Entity Name: BAYSHORE CONSULTANTS, INC.

Current Principal Place of Business:

3300 UNIVERSITY DRIVE
SUITE 806
CORAL SPINGS, FL 33065 US

Current Mailing Address:

30628 DETROIT ROAD
238
WESTLAKE, OH 44145 US

New Principal Place of Business:

315 S W 15TH. STREET
SUITE 8
POMPANO BEACH, FL 33060 US

New Mailing Address:

2014 NOTTINGHAM PKWY.
AVON, OH 44011 US

FEI Number: 65-0183977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIES, EDWARD O
3300 UNIVERSITY DRIVE
SUITE 806
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: RIES, EDWARD O
Address: 3300 UNIVERSITY DRIVE, STE. 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VP () Delete
Name: BARON, GRACE L
Address: 3300 UNIVERSITY DRIVE, STE. 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: SEC. () Delete
Name: RIES, EDWARD O
Address: 3300 UNIVERSITY DRIVE, STE 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D () Delete
Name: RIES, EDWARD O
Address: 3300 UNIVERSITY DRIVE, STE. 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D () Delete
Name: BARON, GRACE L
Address: 3300 UNIVERSITY DRIVE, STE. 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: TRES () Delete
Name: RIES, EDWARD O
Address: 3300 UNIVERSITY DRIVE, STE. 806
City-St-Zip: CORAL SPRINGS, FL 33065 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RIES, EDWARD O
Address: 315 S W 15TH. STREET, STE. 8
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: RIES, EDWARD O
Address: 315 S W 15TH. STREET, STE. 8
City-St-Zip: POMPANO BEACH, FL 33060 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD O. RIES

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date