2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

SIGNATURE

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 22, 2005 8:00 am Secretary of State DOCUMENT # N9700000012 04-22-2005 90301 019 ****61.25 THE BAYLIS CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address DEJAVU PROPERTIES PO BOX 191904 501 12TH STREET **MIAMI FL 33139** MIAMI BEACH FL 33119 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State City & State Applied For 4. FEI Number 65-0851401 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KodKiguez BARENBONG; WILLIAM Street Address (P.O. Box Number is Not Acceptable) 501-12 ST APT. 1 MIAMI BEACH FL 33139 8. 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. I am familiar with, and accept the obligations of registered agent. 2-9-05 DATE (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2005 Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 JOEL RODRIQUEZ Change TITLE ☐ Delete TITLE PD RODRIGUEZ, JOSE NAME 505 12TH ST., #11 STREET ADDRESS STREET ADDRESS MIAMI DEACH, FI 33/39 MIAMI BEACH FL 33139 CITY-ST-7IP CITY-ST-ZIP RICHARD NEWSTEDTER Change FAddition 505 12th ST. #10 MIANU BEACH FC 33/39 Christine PAND 220 Change FAddition 501 12th ST. #1 Delete TITLE VID TITLE BESS, JEFFREY L NAME NAME 9235 S.W. 45 ST. STREET ADORESS STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TD: SARNER, STEPHEN NAME 6181 S.W. 56 CT. STREET ADDRESS STREET ADDRESS ANDREA Thompson Change CHATCHION 503 124 St. 73 CITY-ST-7IP DAVIE FL 33314 CITY-ST-ZiP TITLE SID Delete STREET ADDRESS STREET ADDRESS MIAMI BEACH, FL 33/39 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustae empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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