

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 27, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P00000064292**1. Entity Name  
BAYVIEW LINEN COMPANY

## Principal Place of Business

7561 N.W. 16TH STREET, #2310

PLANTATION  
33313

FL

## Mailing Address

7561 N.W. 16TH STREET, #2310

PLANTATION  
33313

FL

## 2. Principal Place of Business

7561 N.W. 16TH STREET,

Suite, Apt. #, etc.  
#2310City & State  
PLANTATION

FL

Zip  
33313

Country

## 3. Mailing Address

7561 N.W. 16TH STREET,

Suite, Apt. #, etc.  
#2310City & State  
PLANTATION

FL

Zip  
33313

Country

## 4. FEI Number

65-1021157

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

MUNROE WARREN  
7561 N.W. 16TH STREET, #2310PLANTATION  
33313

FL

## 7. Name and Address of New Registered Agent

Name

MUNROE WARREN

Street Address (P.O. Box Number is Not Acceptable)  
7561 N.W. 16TH STREET,

#2310 WARREN MUNROE

City  
PLANTATION

FL

Zip Code  
33313

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.

SIGNATURE **WARREN MUNROE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/27/2001

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE SD ☐ Delete  
NAME CASTLEBERRY SID  
STREET ADDRESS 7561 N.W. 16TH STREET, #2310  
CITY-ST-ZIP PLANTATION FL 33313TITLE VPD ☐ Delete  
NAME MUNROE WARREN  
STREET ADDRESS 7561 N.W. 16TH STREET, #2310  
CITY-ST-ZIP PLANTATION FL 33313TITLE PD ☐ Delete  
NAME WILE JOHN  
STREET ADDRESS 7561 N.W. 16TH STREET, #2310  
CITY-ST-ZIP PLANTATION FL 33313TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Warren munroe**

VPD

04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)