

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000094938

1. Entity Name

Baires Group Enterprises, Inc



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 NOV 5 PM 2:03

DO NOT WRITE IN THIS SPACE

100024451941
11/05/03--01059--011 **150.00

2. Principal Place of Business
10295 Collins Ave

3. Mailing Address
10295 Collins Ave

Suite, Apt. #, etc.
1511

Suite, Apt. #, etc.
1511

City & State
Bal Harbour, FL.

City & State
Bal Harbour, FL.

4. FEI Number
651047341

Applied For
Not Applicable

Zip
33154

Country
US

Zip
33154

Country
US

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Marcelo F Morana

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

10295 Collins Ave # 1511

City
Bal Harbour

FL

Zip Code
33154

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.

Marcel F Morana

110303

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD-Leonardo E Ledain- 6241 NW 16th Place
Sunrise, Fl. 33133

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSTD - Marcelo F Morana - 6241 NW 49th
Place, Sunrise, Fl. 33133

TITLE
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CITY - ST - ZIP

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IN THIS SPACE**

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

November 3, 2003

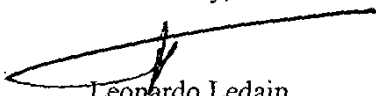
State of Fl. Div of Corp
PO Box 6327
Tallahassee, FL. 32314

RE: Baires Group Enterprises, Inc.
P00000094938
Agrefert Corporation
P02000059707

To Whom It May Concern:

We received a letter from our lawyer that our corporations are dissolved. There has to be a mistake since we sent the renewal forms and payments since March 12th this year, We actually sent both corporations to be renewed at the same time. We have verified with our bank and the checks have not been cashed yet, a stop payment has been issued on both checks. Since we do not have copies of the original reports filed we are sending a blank form from your office and new checks for each corporation. Please process the forms as soon as possible since this is delaying a matter at this time. We appreciate your help in this matter.

Yours truly,



Leonardo Ledain
President for both Corporations