

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90892 022 ***158.75

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100010004

1. Entity Name

BAY DRIVE DEVELOPMENT X, CORP.

003911

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2742 Biscayne Blvd

State, Apt. #, etc.

State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

Miami FL

4. FEI Number

65-1146847

Applied For

Not Applicable

Zip

Country

Zip

Country

33137

USA

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

OSCAR GARCIALES-BACINI

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

999 Brickell Avenue

Suite

700

City

Miami

FL

Zip Code

33131

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IN THIS SPACE

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

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

(NOTE: Registered Agent signature required when transferring)

DATE

04/23/2002

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$350.00

Amended UBR is \$81.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PD Ernesto Luis Brodschi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Norma Beatriz Perelsztein de Brodschi
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Mario Victor Polak
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Maria Silvia Slamovich de Polak
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: X Brodschi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/2002

Date

Deputy Phone #

CR2E034B (12/01)