## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P01000117620

1. Entity Name

BAYVIEW INVESTMENTS REALTY, INC.



Principal Place of Business

Mailing Address

5712 HOLLYWOOD BLVD HOLLYWOOD, FL 33021

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## FILED Mar 14, 2008 8:00 am Secretary of State

03-14-2008 90029 004 \*\*\*150.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 01-0562925

Applied For Not Applicable

5. Certificate of Status Desired

<u>03. 11.08</u>

\$8.75 Additional Fee Required

954-394-3480

6. Name and Address of Current Registered Agent

PRICE, IRA B 9100 S DADELAND BLVD 1701

MIAMI, FL 33156

SIGNATURE:

## DO NOT WRITE 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)  DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financin     Trust Fund Contribution.	9 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE	PSD				
NAME	BLANCO, JEANNETTE	1			
STREET ADDRESS	5712 HOLLYWOOD BLVD				
CITY-ST-ZIP	HOLLYWOOD, FL 33021				
TITLE	D =2,				
NAME	LEE, ROBERT N				<del>-</del>
STREET ADDRESS	5712 HOLLYWOOD BLVD	I -	•		
CITY-ST-ZIP	HOLLYWOOD, FL 33021				
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 employered to execute this report as required by Chapter 607, 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.					

ED NAME OF SIGNING OFFICER OR DIRECTOR