

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Aug 25, 2003 8:00 am
Secretary of State

08-25-2003 90106 013 ***150.00

0052922 AV

DOCUMENT # P02000017474

1. Entity Name
PALMETTOBAYREALTY.COM INC.



Principal Place of Business
**9620 SW 163 ST
MIAMI FL 33157**

Mailing Address
**9620 SW 163 ST
MIAMI FL 33157**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 565717
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Pinecrest FL 33256

City & State
Pinecrest FL 33256

Zip
33256

Country
USA

4. EEL Number
75-2998927

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
**PINO, AGUSTIN R
9620 SW 163 ST
MIAMI FL 33157**

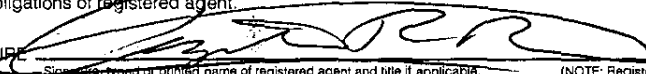
7. Name and Address of New Registered Agent

Name

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

City
FL Zip Code

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:  (NOTE: Registered Agent signature required when reinstating)

DATE: **8-24-03**

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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	P PINO, AGUSTIN R 9620 SW 163 ST MIAMI FL 33157	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **8-24-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (4/03)

AHachment#
80140338
P02000017474

PalmettoBayRealty.Com Inc.
P.O. Box 565717
Miami Fl. 33256-5717
305-255-7155

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee Fl. 32305-1500

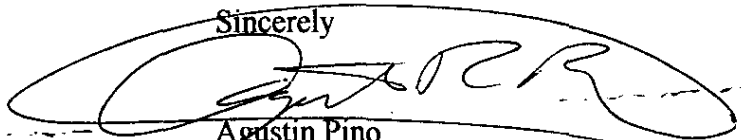
August 20, 2003

To whom it may concern:

I hereby give notice in this letter that I had not received my 2003 UBR Report filing documents until I received this document asking for a late fee of \$400.00. This is the first year of operation for my company and I asked that the penalty be waived. I believe the penalty is a tremendous hardship for a small business. I have attached payment in the amount of \$150.00 as full payment. Please accept this without any penalty.

Please note I have updated mailing address so that future problems can be corrected.

Sincerely

A handwritten signature in black ink, appearing to read 'Agustin Pino', enclosed within a large, hand-drawn oval.

Agustin Pino
Chairman