2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000064163

1. Entity Name

BAYSHORE CONNECTIONS, INC.

(SEE NAME CHANGE AMONDMENT)

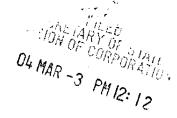
Principal Place of Business

500 E. KENNEDY BLVD.

SUITE 101 C TAMPA, FL 33602 Mailing Address

500 E. KENNEDY BLVD.

SUITE 101 C TAMPA, FL 33602





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u		IVUI	TALL I			JEMUL

01232004 No Chg-P CR2E034 (10/03)

4. FEI Number 03-0463628

Applied For Not Applicable

03-0403026

\$8.75 Additional

Certificate of Status Desired

Fee Required

_6Name and Addres	s of Current	Registered	Agent

BAKER, PETER 500 E. KENNEDY BLVD. SUITE 101 C TAMPA, FL 33602

10.

DO NOT WRITE IN THIS SPACE

8.	. The above named entity submits this statement for the purpose of changing its registered of	office or registered agent, or both, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent.		
SI	IGNATURE		
	at the state of th	- 4 - (1	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

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

D TITLE SAAVEDRA, CARLA J NAME STREET ADDRESS 2810 OLD BAYSHORE WAY CITY-ST-ZIP TAMPA, FL 33611 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

OFFICERS AND DIRECTORS

200029527762 03/01/04--01004--005 **150.00

DO NOT WRITE 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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

NAME STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1/26/04 (813)263-4092