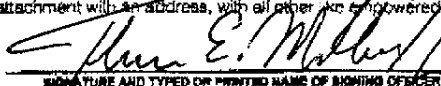


FILED

04/20/2006 19:07 3411517

OFFICE

May 01, 2006 08:
Secretary of St**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000119584 1. Entry Name BAYVIEW COMMUNICATIONS INC.			
Principal Place of Business 4014 TREASURE CIRCLE TAMPA, FL 33616		Mailing Address 4014 TREASURE CIRCLE TAMPA, FL 33616	
DO NOT WRITE IN THIS SPACE		 04262006 No Chg-P CR2E034 (11/05)	
4. FEI Number 05-0540153		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, THOMAS 4014 TREASURE CIRCLE TAMPA, FL 33616		DO NOT WRITE IN THIS SPACE	
7. 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		DATE: APRIL 28, 2006 (NOTE: Registered Agent signature required when renewing)	
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U00000543863 05/11/06-80012-020 150.00	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PSTD MILLER, THOMAS 4014 TREASURE CIRCLE TAMPA, FL 33616		
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY, ST, ZIP			
TITLE NAME STREET ADDRESS CITY, ST, ZIP			
TITLE NAME STREET ADDRESS CITY, ST, ZIP			
TITLE NAME STREET ADDRESS CITY, ST, ZIP			
12. I hereby certify that the information supplied with this filing 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 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 persons empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: APRIL 28, 2006 813-928-7378 Daytime Phone #	