2006 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Jan 10, 2006 08:00 A		
DOCUMENT # P03000016425 1. Entity Name BAYFRONT INTERNATIONAL REALTY, INC.					Sec	cretary of Sta
959 CRAND	ce of Business ON BLYD. NE, FL 33149	Mailing Address 128 MASHTA DRIVE KEY BISCAYNE, FL 33149				
general Company					,	
	O NOT WRITE	NOT WRITE IN THIS SPACE O1062006 No C Fill Number 30-0152195 S. Certificate of Status Name and Address of Current Registered Agent ETH F BOULEVARD FIL 33149 I entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the registered agent. Once or printed name of registered agent and title if applicable. ONTE Registered Agent sizesture required when remarkating) WITH FEE 13 \$150.00 9. Election Campaign Financing \$5.00 May Be		No Chg-P	CR2E034 (11/05)	
The second second				4. FEI Numb 30-015	er 2195	Applied Fo
and marks a call of the collection of the call of the	elegation for the second of th			5. Certificate	of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current R	gistered Agent				
CALVO, LIZABETH F 328 CRANDON BOULEVARD SUITE 226 KEY BISCAYNE, FL 33149				DO	NOT W	RITE
					计算程序 社会 "多数传承"	計画機能の2007年、マルバートに呼る
NET BISC	MINE, FL 33148					
SIGNATURE.	Sgreture, typed or printed name of registered agent an	9. Election Campaign Fina	ancing _ \$5.	.00 May Be	U000	003820 0 4
	ay 1, 2006 Fee will be \$550.00		. LI Add	ed to Fees	niviivn	6-80076-019 150.0
TITLE NAME	PD ROMANO, PATRICIA					The second secon
STREET ADDRESS	128 MASHTA DRIVE					
CITY-ST-ZIP TITLE	KEY BISCAYNE, FL 33149			t an cyclosed and		
NAME STREET ADDRESS	CASTRO, HECTOR 128 MASHTA DRIVE					
CITY-6T-ZIF	KEY BISCAYNE, FL 33149	A CONTRACTOR OF THE CONTRACTOR				
TULE	T VILLA, PATRICIA					
STREET ADDRESS CITY - ST - ZIP	959 CRANDON BLVD. KEY BISCAYNE, FL 33149				NOT W	RITE
TRILE	Ţ			IN.	THISSI	ACE
NAME STREET ADDRESS	ROISENVIT, PATRICIA 969 CRANDON BLVD.				a design of the state of	
CTIY-ST-ZIP	KEY BISCAYNE, FL 33149		THE PERSON NAMED IN		والمراجع والمستحد والمتحدث والمتحدث والمتحدث	andrea de la color de 1800 de Color de la color de 1800 de 1
NAME STREET ADDRESS						Description of the contract of the second of
CITY-ST-ZIP						
TITLE NAME			270 277 11 11 11 11 11 11 11 11	434 WB WB 18		Control of the second of the s
STREET ADDRESS CXTY+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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an acturess, yet all other like empowered.

SIGNATURE:

HECTOR (HECTOR CASTRO

6/06

305-361-8886

Daylime Phone #