

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000016425

FILED
Jun 07, 2007
Secretary of State

Entity Name: BAYFRONT INTERNATIONAL REALTY, INC.

Current Principal Place of Business:

959 CRANDON BLVD.
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

128 MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 30-0152195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVO, LIZABETH F
328 CRANDON BOULEVARD
SUITE 226
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROMANO, PATRICIA
Address: 128 MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: SD () Delete
Name: CASTRO, HECTOR
Address: 128 MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T () Delete
Name: VILLA, PATRICIA
Address: 959 CRANDON BLVD.
City-St-Zip: KEY BISCAYNE, FL 33149

Title: T () Delete
Name: ROISENVIT, PATRICIA
Address: 959 CRANDON BLVD.
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: Riestra-Peraita, Patricia
Address: 959 CRANDON BLVD.
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LIZABETH F CALVO

RA

06/07/2007

Electronic Signature of Signing Officer or Director

Date