2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 15, 2004 8:00 am Secretary of State

DOCUMENT # P0 3C 00060136 1. Entity Name BAYFRONT LENDING G RC UP, INC.					07-15-2004 9	90009 028 **	*150.00	
Principal Place of I 130 SOUTH UNIV PLANTATION, FL	ERSITY DR., SUITE A	Mailing Address 130 SOUTH UNIVERSITY PLANTATION, FL 33324						
2. Principal Place of Business University S. Mailing Address Sume								
Suite, Apr. #, etc. Dr. Suite, Apr. #, etc.					Chg-P C	R2E034 (10/03)		
Plantation FL City & State				4. FEI Numbe	171039		plied For Applicable	
ZIP 3339	Countr	Zip =.	Country	- ~ · · ·	ri Status Desired - [\$8.75 Add	itional .	
	Name and Add eas of Curre	nt Registered Agent	·····		Address of New Regist	Fee Require ered Agent	<u></u>	
Name								
44#0 (4E 00) (5 0) .				se (P.O. Box Number Is Not Acceptable)				
FT. LAUDERE	DALE, FL 333 18				The state of the s			
	1		City	•	-	FL Zp Cod	• · · · · · ·	
8. The above nem	ned entity submits this statement	for the purpose of changing its r	egistered office or regi:	stered agent, or bot	1, in the State of Florida,	1	and eccept	
the obligations of registered agent.					7/64			
SIGNATURE Signature, 1-ped or primed na 24 of egistered agent and title if applicable. (NOTE: Registered Agent algoriture required						DATE /		
	NOWIII FEE I \$\$ 150.00 by Septembe 8, 2004	Election Campaig Trust Fund Contri		5.00 May Be added to Fees	In accordance with a corporation did not r	s. 607.193(2)(b), eceive the prior (F.S., the notice.	
10.	OFF CERS AN	ID DIRECTORS	11.	ADDITIONS/	CHANGES TO OFFICER			
NAME GA STREET ADDRESS 13	ALLING, KEVIN 10 SOUTH UNIVERSITY DR. ANTATION, FL 33:24	□ Delete , SUITE A	NAME STREET ADDRESS CITY-ST-ZIP			☐ Chançe	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP	4 5 2 7	□ Delete	TITLE. NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delcte	TITLE NAME STREET ADDRESS CITY-51-ZEP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delste	TITLE NAME \$TREET ADDRESS CITY-ST-ZIP			☐ Chançe	· 🗖 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- #	□ Delate	YITLE NAME STREET ADDRESS CMY-ST-ZIP			☐ Change	☐ Addition	
of the corpora changed, or c	ation or the receive for sustee on an attachment with an address	with this filling does not qualify for tis true and securate and that m nowered to execute this report as, with all other like ampowered.						
SIGNATU		OR PRINTED NAME OF BIGHING OFFICER O	A DIRECTOR		711104	954 33 Deytine Phone #	6-720	

Jul. 7. 2004 4:12PM WIND30R CAPITAL