

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000131306

FILED
May 01, 2008
Secretary of State

Entity Name: BAIREs NATIONWIDE ENTERPRISES, INC

Current Principal Place of Business:

17620 NW 17 AVE
SUITE 102
MIAMI GARDEN, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

17620 NW 17 AVE
SUITE 102
MIAMI GARDEN, FL 33056 US

New Mailing Address:

FEI Number: 26-1518425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAIREs, JUAN
17620 N W 17 AVE
SUITE 102
MIAMI GARDEN, FL 33056 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAIREs, JUAN
Address: 17620 NW 17 AVE STE 102
City-St-Zip: MIAMI GARDEN, FL 33056 US

Title: VP () Delete
Name: BAIREs, WILLY H
Address: 17620 NW 17 AVE STE 102
City-St-Zip: MIAMI GARDEN, FL 33056 US

Title: TREA () Delete
Name: BAIREs, JUAN
Address: 17620 NW 17 AVE STE 102
City-St-Zip: MIAMI GARDEN, FL 33056 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JUAN BAIREs

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date