SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

5/12
7/12

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:04

DOCUMENT # **P39149** **(0)**

1. Corporation Name
BAY FINANCIAL CORPORATION

Principal Place of Business	Mailing Address
C/O ZELLER REAL ESTATE GROUP 501 BRICKELL KEY DR. 504 MIAMI FL 33131 US	C/O ZELLER REAL ESTATE GROUP 501 BRICKELL KEY DR. 504 MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
06/05/1992	02/10/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number
04-2680697
☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. [illegible] ☐ **$5.00** May Be Added to Fees

8. This corporation has [illegible] Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ZELLER, MARTIN V. % ZELLER REAL ESTATE GROUP INC 501 BRICKELL KEY DR #504 MIAMI FL 33131	81 Name 82 [illegible] (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of [illegible] Statutes.

SIGNATURE: [illegible] NOTE: If registered agent is changing, this signature must be that of the new registered agent. Date

12. OFFICERS AND DIRECTORS		13. Additions		
TITLE	AS	TITLE	SECRETARY, TREASURER	☑ Change ☐ Addition
NAME	SHERBAL, DAVID S	NAME	SHERBAL, DAVID S.	
STREET ADDRESS	501 BRICKELL KEY DR #504	STREET ADDRESS	501 Brickell Key Drive	
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP	Miami, FL	
TITLE	P	TITLE		☐ Change ☐ Addition
NAME	ZELLER, MARTIN V.	NAME		
STREET ADDRESS	%501 BRICKELL KEY DRIVE	STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP		
TITLE	~~VST~~	TITLE		☐ Change ☐ Addition
NAME	GOLDBERG, LEE H.	NAME		
STREET ADDRESS	%501 BRICKELL KEY DRIVE	STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP		
TITLE	~~D~~	TITLE		☐ Change ☐ Addition
NAME	BRYNE, RICHARD R.	NAME		
STREET ADDRESS	%501 BRICKELL KEY DRIVE	STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP		
TITLE	D	TITLE		☐ Change ☐ Addition
NAME	VILLANUEBA, PERRY A.	NAME		
STREET ADDRESS	%501 BRICKELL KEY DRIVE	STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	CITY-ST-ZIP		
TITLE		TITLE		☐ Change ☐ Addition
NAME		NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		

14. I (We) hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 6/13/95 305-666-6956
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

0000000 CP