

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 APR 28 PM 2:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P92000007601 (7)**

1. Corporation Name

**BAY REAL ESTATE INC.**

Principal Place of Business

101 CENTURY 21 DR  
SUITE 119-B  
JACKSONVILLE FL 32218

Mailing Address

101 CENTURY 21 DR  
SUITE 119-B  
JACKSONVILLE FL 32218

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/30/1992

3a. Date of Last Report

04/21/1994

4. FEI Number

59-3152810

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

☐

**\$5.00** May Be  
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

HUBAY, EDWARD SR.  
333 LAURINA ST #224  
JACKSONVILLE FL 32218

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

781 Libra St.

83 Jacksonville, FL 32216

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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

|                 |                     |
|-----------------|---------------------|
| TITLE           | S                   |
| NAME            | HUBAY, EDWARD       |
| STREET ADDRESS  | 333 LAURINA ST #224 |
| CITY - ST - ZIP | JACKSONVILLE FL     |
| TITLE           |                     |
| NAME            |                     |
| STREET ADDRESS  |                     |
| CITY - ST - ZIP |                     |
| TITLE           |                     |
| NAME            |                     |
| STREET ADDRESS  |                     |
| CITY - ST - ZIP |                     |
| TITLE           |                     |
| NAME            |                     |
| STREET ADDRESS  |                     |
| CITY - ST - ZIP |                     |
| TITLE           |                     |
| NAME            |                     |
| STREET ADDRESS  |                     |
| CITY - ST - ZIP |                     |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                       |                                                                              |
|---------------------|-----------------------|------------------------------------------------------------------------------|
| 1.1 TITLE           | S                     | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            | Hubay, Edward         |                                                                              |
| 1.3 STREET ADDRESS  | 781 Libra St.         |                                                                              |
| 1.4 CITY - ST - ZIP | Jacksonville FL 32216 |                                                                              |
| 2.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 2.2 NAME            |                       |                                                                              |
| 2.3 STREET ADDRESS  |                       |                                                                              |
| 2.4 CITY - ST - ZIP |                       |                                                                              |
| 3.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 3.2 NAME            |                       |                                                                              |
| 3.3 STREET ADDRESS  |                       |                                                                              |
| 3.4 CITY - ST - ZIP |                       |                                                                              |
| 4.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 4.2 NAME            |                       |                                                                              |
| 4.3 STREET ADDRESS  |                       |                                                                              |
| 4.4 CITY - ST - ZIP |                       |                                                                              |
| 5.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 5.2 NAME            |                       |                                                                              |
| 5.3 STREET ADDRESS  |                       |                                                                              |
| 5.4 CITY - ST - ZIP |                       |                                                                              |
| 6.1 TITLE           |                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME            |                       |                                                                              |
| 6.3 STREET ADDRESS  |                       |                                                                              |
| 6.4 CITY - ST - ZIP |                       |                                                                              |

14. I do 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)(k), 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:

Edward Hubay

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95

904-725-3526