PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200007601

BAY REAL ESTATE INC.

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90118 015 ***150.00



Principal Place of business	Maning Address			1				
ioi Century 21 dr Suite 119-b Jacksonville fl 32216	101 CENTURY 21 DR SUITE 119-B JACKSONVILLE FL 32216		į		DO NOT WRITE IN THI	S SPACE	<u> </u>	
MOROGOTTIELE TE GELTO				3.	Date Incorporated or Qualifed			
	•				11/30/1992			
2. Principal Place of Business	2a. Mailing Address			4.	FEI Number		Applied For	
1 Chite 119D		119	D	•	59-3152810		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status Desired		75 Additional se Required	
City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution	•	.00 May Be	
23	28			-				
Zip Country	Zip Cou	intry		8.	This corporation owes the current year I Personal Property Tax.	ntangible		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
	<u> </u>	81	Name					
Hubay, Edward Sr. 6223 Lake Tahoe Dr.		82	Street Addres	set Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE FL 32216		83					_	
		84	City		F	85	Zip Code	
11≓ Pursuant to the provisions of Sections 607.0502	and 607:1500; Florida Statutes, the a	bove	named corpor	ration	resubmits this statement for the purpose	of changi	ng-its-registered—	

, agent, rai	III lattillat with, and accept the congestion of cooling to the		3/15/64						
SIGNATURE	all they total thebry	-4460	3/11/17						
Signature, typed or printed name of registered agent and use it applicable. (NOTE: Registered Agent signature required minintermand resolution (CHANCES TO OFFICERS AND DIRECTORS IN 12									
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	S □ DELETE	1.1 TITLE							
NAME	HUBAY, EDWARD	1.2 NAME							
STREET ADDRESS	6223 LAKE TAHOE DR.	1.3 STREET ADDRESS							
CITY-ST-ZIP	JACKSONVILLE FL 32256	1.4 C/TY-ST-ZIP							
TTLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition						
NAME		2.2 NAME							
STREET ADDRESS		2.3 STREET ADDRESS							
CITY-ST-ZIP		2.4 CITY+ST+ZIP							
TITLE	☐ DELETE	3.1 TITLE	ChangeAddition						
NAME		3.2 NAME							
STREET ADDRESS		3.3 STREET ADDRESS							
CITY-ST-ZIP		3.4. CITY-ST-ZIP							
TITLE	☐ DELETE	4.1 TITLE	Change Addition						
NAME		4, 2 NAME							
STREET ADDRESS		4.3 STREET ADDRESS							
CITY-ST-ZIP		4.4 CITY-ST-ZIP							
TITLE	☐ DELETE	5.1 TTLE	☐ Change ☐ Addition						
NAME		5.2 NAME							
STREET ADDRESS		5.3 STREET ADDRESS							
CITY-ST-ZIP		5.4 CITY-ST-ZIP							
TITLE	· - ~ DELETE	6.1 TITLE	Change Addition						
NAME		6.2 NAME							
STREET ADDRESS	,	6.3 STREET ADDRESS							
A		6.4 CfTY-ST-ZiP							

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE:

Hubay Sr. 3/15/99 904-726-3506