SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300035607 (9)

BAYSIDE BUILDING & DESIGN, INC.

FILED Sep 17 1997 8:00am Secretary of State

Principal Place 3900 BONAVE FT LAUDERDA	NTURE BLVD.	Mailing Address 3900 BONAVENTURE BLVD. FT LAUDERDALE FL 33312		DO NOT WRIT	TE IN THIS SPACE	
				3. Date Incorporated or Qualified		
				05/18/1993	07/02/1	
	lace of Business	2a. Mailing Address 26 1415 5W 117	th Terr	4. FEI Number		Applied for
21 1415 Sulte, Apt.		26 1415 5W 11'	15.44	65-0462591	-	Not Applicable 75 Additional
22	#, 6 10.	27		Certificate of Status Desired		ee Recuired
City & State	0	City & State		6. Election Campaign Financing		5.00 May Be
23 Pomf	Pano Beach, FL	28 POMOSNO	BCh, FC	Trust Fund Contribution		dded to Fees
Zip	069 25 US	29 3306 9 30	Country	This corporation owes or has p Personal Property Tax due Jun	·	
	9. Name and Address of Current			10. Name and Address of New R		
129 SUI FT I	BAL INFORMATION SERVICES, IN 10 Weston RD Te 214 Lauderdale FL 33326		83 84 City	dress (P.O. Box Number is Not Accepte	FL B5	Zip Code
SIGNATURE	Signature, typed or printed name of registered ager	nt and tille if applicable (NOTE. R	ogisterød Agent signature req		DATE	· · · · · · · · · · · · · · · · · · ·
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF		
TITLE	Bell, Robert K	☐ DELETE	1.1 TITLE L	ALL DARPOT 14	[_] Ch	nange 🔲 Addition
STREET ADDRESS	1709 SW 12TH COURT		13 STREET ADDRESS	211, ROBERT IL 415 SW 11th Terr Pompano Beach, Fi		
CITY-ST-ZIP	FT LAUDERDALE FL 33312		1.4 City-S1-ZiP	Pompano Beach F	L 33069	\
TITLE		☐ DELETE	2.1 TITLE		☐ Ch	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		<u> </u>	
TITLE		☐ DELETE	3.1 TITLE		☐ Ch	nange 🔲 Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			Ì
CITY-ST-ZIP	 	Deserve	3.4, CITY-ST-ZIP		····· [] ~.	
TITLE		☐ DELETE	4.1 1fTLE		[] Ch	nange 🔲 Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			ļ
CITY-ST-ZIP		☐ DELFTE	4.4 CITY-ST-2IP		☐ Ch	nange Addition
TITLE			5.1 TITLE		L., (/I	ango LJ Mouldoft
NAME CODECT ADDOCCC			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			ļ
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Ch	ange Addition
		□ vcc+c			الله الــا	ange LT Workfold
NAME CTREET ADODECC			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0 - 1 - 440 07(0V) Florida Di 44		

4. I do 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 chapted, or own attactment with an address.

0/0/07

n-1.701 2000