

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Feb 24 1997 8:00 am
Secretary of State

DOCUMENT # P93000046465 (9)

1. Corporation Name
BAYSIDE PROPERTY MANAGEMENT, INC.



Tax ID # 65-0543958

Principal Place of Business

811 NE 123RD ST.
N. MIAMI FL 33181
US

Mailing Address

P.O. BOX 800000
AVENTURA FL 33009-0000
US

3. Date Incorporated or Qualified 06/25/1993
3a. Date of Last Report 02/01/1996

2. Principal Place of Business

21 12920 NE 8th Ave
Suite, Apt. #, etc.

2a. Mailing Address

26 PO Box 530582
Suite, Apt. #, etc.

4. FEI Number NOT APPLICABLE 65-0543958
Applied For Not Applicable

22 City & State

23 No Miami FL

24 33161 25 USA

27 City & State

28 Miami Shores FL

29 33153 30 US

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent

TIRELLA, ALFRED J
811 NE 123RD STREET
NORTH MIAMI FL 33181

12920 NE 8th Ave
No Miami FL
33161

10. Name and Address of New Registered Agent

81 Name

82 Street Address (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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

President

ALFRED J. TIRELLA

2/19/97

DATE

12. OFFICERS AND DIRECTORS

TITLE VSPT
NAME TIRELLA, ALFRED J
STREET ADDRESS 1228 N.E. 88TH STREET
CITY-ST-ZIP MIAMI SHORES 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 changed, or on an attachment with an address.

SIGNATURE:

President

ALFRED J. TIRELLA

2/19/97

305-893-6065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2034 (9/96)