FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 28 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000067564 (3)**

1. Corporation Name
BAY POINTE CONSTRUCTION CORP.

Principal Place of Business	Mailing Address
1301 W COPANS RD SUITE C-10 POMPANO BEACH FL 33064	PO BOX 2449 POMPANO BEACH FL 33061

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/28/1993
3a. Date of Last Report: 04/06/1994

2. Principal Place of Business
21 664 S. Military Trail
Suite, Apt. #, etc.
22
City & State
23 Deerfield Beach, FL
Zip 24 33442 Country 25 US

2a. Mailing Address
26 664 S. Military Trail
Suite, Apt. #, etc.
27
City & State
28 Deerfield Beach, FL
Zip 29 33442 Country 30 US

4. FEI Number: 65-0440403 ☐ Applied For ☐ Not Applicable

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

BLAKE, GERALD F
% MAGNA PROPERTIES, INC.
1301 W COPANS RD C-10
POMPANO BCH FL 33064

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 664 S. Military Trail
83
84 City Deerfield Beach FL 85 Zip Code 33442

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DV	11 TITLE		☑ Change ☐ Addition
NAME	FORRER, JOHN O	12 NAME		
STREET ADDRESS	1301 W COPANS RD SUITE C-10	13 STREET ADDRESS	664 S. Military Trail	
CITY-ST-ZIP	POMPANO BEACH FL	14 CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE	DP	21 TITLE		☑ Change ☐ Addition
NAME	BLAKE, GERALD F	22 NAME		
STREET ADDRESS	1301 W COPANS RD SUITE C-10	23 STREET ADDRESS	664 S. Military Trail	
CITY-ST-ZIP	POMPANO BEACH FL	24 CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE	VTS	31 TITLE		☑ Change ☐ Addition
NAME	BRACKEN, C M	32 NAME		
STREET ADDRESS	1301 W COPANS RD C-10	33 STREET ADDRESS	664 S. Military Trail	
CITY-ST-ZIP	POMPANO BCH FL	34 CITY-ST-ZIP	Deerfield Beach, FL 33442	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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: Gerald F. Blake 2/7/95 305-419-1011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Gerald F. Blake

0425018 FP