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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000071324 (6)

BAYMAR OF MIAMI, INC.

FILED Feb 06 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | -{ | Elli Silili Eddi |) | # 0 10 10 10 10 10 10 10 | |
|---|---|-----------------------------------|-----------------------|--|-----------------------------|---|---------------------------------------|----------------|--|--|
| 12911 SW 10TH CT 12911 SW 10TH CT DAVIE FL 33325 DAVIE FL 33325 | | | | | | | | | | |
| 51112 12 2220 | | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| 1 | | | | | | 3. Date Incorporated or Qualified | | | | |
| D Principal P | 2a. Malling Address | 1 ddroop | | | 10/14/1993 4. FEI Number | | | | | |
| <u></u> | face of Business | <u> </u> | 28. Islaning Address | | | 65-0460655 | | \ | plied For ot Applicable | |
| Suite, Apt. | #. etc. | | Suite, Apt. #, etc. | | | | | | Additional | |
| 22 | · | 27 | | | | 5. Certificate of Status Desired | | Fee Re | | |
| City & State | e | City & State | | | | 6. Election Campaign Financing | _ | \$5.00 | | |
| Zip | Country | 28 7 n | Zip Country | | | Trust Fund Contribution | <u> </u> | Added 1 | | |
| <u> </u> | 25 | 29 | 30 | цy | | 8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Yes No | | | | |
| 24 | 9, Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | | | | | |
| | | | | | 81 Name | | | | | |
| | FITAL CONNECTION, INC. FE VIRGINIA ST | | _ | | | | | | | |
| | TE 1 | | 18 | 32 Str | eet Addre | ss (P.O. Box Number is Not Accepta | ble) | | ł | |
| | LAHASSEE FL 32301 | | 8 | 13 | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | 8 | 34 City | | | | 85 Zip (| Code | |
| | | | | | | | FL | . | ŀ | |
| 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 little if applicable. (NOTE Registered 12. OFFICERS AND DIRECTORS 13. | | | | igent sign | ature required | ADDITIONS/CHANGES TO OFFI | | DIRECTOR | S IN 12 | |
| TITLE | D OF FIGURE 7 | DELETE | 1.1 TITU | | Τ- | ADDITIONS/CHANGES TO STITE | OLI 10 MINE | Change | Addition . | |
| NAME | SILVA, SERGIO C | | 1.2 NAM | | | | | _ • | | |
| STREET ADDRESS | 12911 SW 10TH CT | | 1 | ET ADDRE | ss | | | |) | |
| CITY-ST-ZIP | DAVIE FL 33325 | | 1,4 CITY | -ST-ZIP | İ | | | | | |
| TITLE | D | DELETE | 2.1 TITL | | | | | Change | Addition | |
| NAME | SILVA, NADIESDA | | 2.2 NAM | Ε | ĺ | | | | | |
| STREET ADDRESS | 12911 SW 10TH CT | | 2.3 \$TRE | ET ADDRE | ss | | | | ſ | |
| CITY-ST-ZIP | DAVIE FL 33325 | | 2. 4 CITY | '-ST-ZIP | | | | | | |
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| NAME | | | 5.2 NAM | | | | | | ļ | |
| STREET ADDRESS | | | | ET ADDRE | SS | | | | 1 | |
| CITY-ST-ZIP | <u>.</u> | DELETE | 5.4 CITY 6.1 TITLE | | | | | Change | ☐ Addition | |
| TITLE | | Ti nerese | | | - | | | | -1 Vagition | |
| NAME | | | 6.2 NAM | | | | | | | |
| STREET ADDRESS | | | | ET ADORE | ∞ | | | | | |
| 14. I hereby certify that the information supplied with this filing does not qualify for the exe | | | | -ST-ZIP option s | tated in Si | ection 119.07(3)(i), Florida Statutes. | further ce | rtify that the | information | |
| indicated | on this annual report or suppleme | and annual report is true and acc | urate and i | hat my | signature | shall have the same legal effect as | f made und | der cath: the | tlaman l | |

indicated on this allular report or supplemental amula report is true and accurate and triat my signature shall have the same legal effect as it made under oath; that I am a 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.