

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

APPROVED
AND
FILED

1997 SEP 18 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham, Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **PG4000052793**

1. Corporation Name

BAY SHELL INC
13398 SEMINOLE BOULEVARD
LARGO, FL 33778-2128

Principal Place of Business

Mailing Address

13398 SEMINOLE BOULEVARD
LARGO, FL 33778-2128

2. Principal Place of Business

21 **ABOVE**

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26 **ABOVE**

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

3a. Date of Last Report

4/97

4. FEI Number

59-3260943

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

10. Name and Address of New Registered Agent

81

Name **PAULINE BITETZAKIS**

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City **LARGO**

FL

85

Zip Code **33778-2128**

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

Pauline Bitetzakis

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☐ DELETE

NAME **PAULINE BITETZAKIS**

STREET ADDRESS **13398 SEMINOLE BLVD**

CITY-ST-ZIP **LARGO, FL 33778-2128**

TITLE **VICE PRESIDENT** ☐ DELETE

NAME **PAULINE BITETZAKIS**

STREET ADDRESS **13398 SEMINOLE BLVD**

CITY-ST-ZIP **LARGO, FL 33778-2128**

TITLE **TREASURER** ☐ DELETE

NAME **PAULINE BITETZAKIS**

STREET ADDRESS **13398 SEMINOLE BLVD**

CITY-ST-ZIP **LARGO, FL 33778-2128**

TITLE **SECRETARY** ☐ DELETE

NAME **PAULINE BITETZAKIS**

STREET ADDRESS **13398 SEMINOLE BLVD**

CITY-ST-ZIP **LARGO, FL 33778-2128**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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: *Pauline Bitetzakis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/2/97

(813) 584-6167

CR2E034 (9/96)