## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT. \_. CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

## P95000003790 (9) **DOCUMENT #**

BAILLIE INTERNATIONAL, INC.

| Principal Place of Business | Mailing Address |
|-----------------------------|-----------------|
|                             |                 |



| Principal Place of Business Mailing Address                                   |  |                     |                        | 1   10   150   110   10   10   10   10                  |  |                  |            |            |
|---|--|---------------------|------------------------|---|--|------------------|------------|------------|
| 3471 NE 17 TERR 3471 NE 17 TERR FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334 |  |                     |                        |   |  |                  |            |            |
|   |  |                     |                        |   | 3. Date Incorporated or Qualified 01/12/1995 | 3a. Date of      | Last Repor | 1          |
| 2. Principal Pla  | ace of Business  | 2a. Mailing Address |                        |   | 4. FEI Number                                |                  | Appl       | lied For   |
| 21  |  | 26                  |                        | 45-0548102  | Not Applicable                               |                  |            |            |
| Suite, Apt. #, etc. Suite, Apt. #, etc.                                       |  |                     |                        | 5. Certificate of Status Desired                        | cate of Status Desired Fee Requir            |                  |            |            |
| 22  |  | 27                  |                        |   |  | <del></del>      |            |            |
| City & State 23   |  | City & State        |                        | Election Campaign Financing     Trust Fund Contribution | S5.00 May Be Added to Fees                   |                  |            |            |
| Zip   | Country  | Zη                  | Countr                 |   | 8. This corporation has liability for i      | intangible tax u |            |            |
| 24  | 25   | 29                  | 30                     |   |  | No               |            |            |
|   | 9. Name and Address of Current   | Registered Agent    |                        | ·   | 10. Name and Address of New R                | egistered Age    | ent        |            |
|   |  |                     | 8.                     | Name  |  |                  |            |            |
| BAILLIE.  | WILLIAM S JR.  |                     | 82                     | Street Addi   | ress (P.O. Box Number is Not Acceptab        | ole)             |            |            |
|   | 17 TERR  |                     | ļ.,                    |   |  |                  |            |            |
| FT LAUC   | DERDALE FL 33334   |                     | 8:                     | ή   |  |                  |            |            |
|   |  |                     | 84                     | City  |  |                  | 85 Zip Co  | ode        |
|   |  |                     | <u>.</u>               | L   | ration submits this statement for the pur    | <u> </u>         |            | 1          |
| SIGNATURE _   | Signature, byted or printed name of registered agent a<br>OFFICERS AND | DIRECTORS           | DTE: Augistered Ag     | ent's gnature require                                   | d wher reinstating) ADDITIONS/CHANGES TO OFF |                  |            |            |
| TITLE   | PD   | DEFELE              | 1. 1 TITE              |   |  |                  | Change [   | ] Addition |
| NAME  | BAILLIE, WILLIAM S JR.   |                     | 1.2 NAME               |   |  |                  |            |            |
| STREET ADDRESS  | 2541 NE 10 AVE   |                     | 1.3 STRE               | T ADDRESS   |  |                  |            |            |
| CHY-ST-ZIP  | POMPANO BEACH FL 33064   | E3 NEVEL            | 1.4 C(TY               |   |  |                  | Channa F   | Addition   |
| TITLE   | VTD  | DELETE              | 2 1 11111              |   |  | LJ.              | Change [   | _ мооноп   |
| NAME  | BAILLIE, MARY H  |                     | 2.2 NAME               |   |  |                  |            |            |
| STREET ADDRESS  | 3471 NE 17 TERR  |                     |                        | ET ADDRESS  |  |                  |            |            |
| CITY-ST-ZIP<br>TITLE  | FT LAUDERDALE FL 33334   | ☐ DELETE            | 2.4 C/TY:<br>3. 1 TITU |   |  |                  | Change F   | Addition   |
| NAME  | SD<br>BAILLIE, CAROL A   | Поселе              | 3. THE                 | _   |  | ٠                | D          | -          |
| STREET ADDRESS  | 3471 NE 17 TERR  |                     |                        | ET ADDRESS  |  |                  |            |            |
| CITY-ST-ZIP   | FT LAUDERDALE FL 33334   |                     | 34 City                |   |  |                  |            |            |
| TITLE   |  | DELETE              | 4. 1 TiTu              |   |  |                  | Change [   | Addition   |
| NAME  |  |                     | 4.2 NAMI               |   |  |                  |            |            |
| STREET ADDRESS  |  |                     | 4.3 STRE               | EL ADDRESS  | 70000100                                     |                  | -50        |            |
| CITY-ST-ZIP   |  |                     | 4.4 City               | ST-ZIF  | <b>70</b> 000163<br>                         | 54nns            |            |            |
| THILE   |  | DELETE              | 5 1 TITE               |   | ***225.00                                    |                  | Change [   | Addition   |
| NAME  |  |                     | 5.2 NAM                |   | · · · · · · · · · · · · ·                    |                  |            |            |
| STREET ADDRESS  |  |                     |                        | ET ADDRESS  |  |                  |            |            |
| CITY-S1-ZIP   |  | P Prese             | 5.4 C/TY               |   |  |                  | Change F   | T Addition |
| TITLE   |  | DELETE              | 6 1 TITE               |   |  |                  | Change [   | Addition   |
| NAME  | 1  |                     | 6.2 NAM                |   |  |                  | •          | u].        |
| STREET ADDRESS  |  |                     | B                      | ET ADDRESS  |  |                  |            | 1432       |
| CITY - ST - ZIP   |  |                     | 6.4 CITY               | -\$1 - ZIP  |  |                  |            |            |

14. Ido 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)(k), 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.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR BAILLY E, U-PHRON 6/10/96 (964) 566-1934