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 # P95000096740 (2)

ISLAND BAY ENTERPRISES, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address					
	BAY HARBOR DRIVE		215 SOUTH BAY HARBOR DRIVE					
KEY LARGO FL 33037		KEY LARGO FL 33037				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						01/01/1996		
2. Principal Pl	ace of Business	2a, Mailing Address				4. FEI Number		Applied For
21		26				65-0627816	-	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.						5 Additional
22		27	27			5, Certificate of Status Desired		Required
City & State		City & State	City & State			6. Election Campaign Financing	\$5.0	May Be
23		28	28			Trust Fund Contribution	•	d to Fees
Zip	Country Zip		′	Country		8. This corporation owes or has paid the curr	ent year	Intangible
24	25	29	30] Yes	No
	9. Name and Address of Curre	nt Registered Agent	81			10. Name and Address of New Registered A	gent	
AYALA, DAIVO S				۱ ا	Name			
215 S. BAY HARBOR DR.			82	1 5	Street Addres	ss (P.O. Box Number is Not Acceptable)		
K	EY LARGO FL 33037							
			83					
			84	1	City		85 Z	ip Code
			"	Τ,	Jily	FL		ib code
11. Pursuant I	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	tes, the abov	e-n	named corpor	ration submits this statement for the purpose of	changing	g its registered
agent la	egistered agent, or both, in the Stati m familiar with, and accept the oblig	e or noridal Such change was a actions of, Section 607.0505, Fl	aumorizea by orida Statute:	y in S.	ne corporation	on's board of directors. I hereby accept the appo	antment .	as registered
SIGNATURE								
	Signature, typed or printed manual treg-stered as		It Registered Age	ent s	signature required	d when reinstating) DATE		
12.		ID DIRI CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PTO	☐ DELETE	1.1 TITLE				Chang	e [_] Addition
NAME	AYALA, DAVID S		1.2 NAME					
STREET ADDRESS				1.3 STREFT ADDRESS				
CITY-ST-ZIP	KEY LARGO FL 33037		1.4 CITY - S	ST-2	ZIP			
TITLE	VSD DELETE		2.1 TITLE			į	Chang	e 🔲 Addition
NAME	AYALA, MARILYN A		2.2 NAME					İ
STREET ADDRESS	215 SOUTH BAY HARBOR	DRIVE	23 STHEET	F ADE	DRESS	6		ļ
CITY-ST-ZIP	KEY LARGO FL 33037		2 4 CITY-	ST-Z	ZIP			
TITLE		☐ DELETE	3.1 TITLE			!	Chang	e 📙 Addition
NAME			3.2 NAME					
STREET ADDRESS		i	3.3 STREET	ADE	DRESS			Į.
CITY-ST-ZIP			3.4. CITY-	SI - Z	719			
TITLE		DELETE	4.1 TITLE				Chang	e 🔲 Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADE	DRESS			ļ
CITY-ST-ZIP			4.4 CITY - S	ST - Z	!IP			
TITLE		☐ DELETE	5.1 TITLE			•	Chang	e Addition
NAME			5.2 NAME					ļ
STREET ADDRESS			5.3 STREET	ADE	DRESS			
CITY-ST-ZIP			5.4 CITY-S	ST - Z	/IP			
TITLE		☐ DELETE	61 TITLE				Chang	e 🔲 Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADE	DRESS			
CITY-ST-ZIP			6.4 CI1Y - S					
14. I hereby c	ertify that the information supplied y	vith this filing does not qualify to	or the exemp	dior	n stated in Se	ection 119.07(3)(i), Florida Statutes. I further cer	tify that t	he 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.