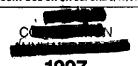
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000026328 (0)

2805 EAST BAY CORP.

Principal Place of Business

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REINSTATEMENT 1997

Mailing Address

APPROVED AND FILED

97 OCT 21 AM 11: 25

SECRETARY OF STATE TALLAHASSEE, FLORIDA



4435 OLD WINTER GARDEN ROAD 4435 OLD WINTER GARDEN ORLANDO FL 32811 ORLANDO FL 32811			I ROAD			
				DO NOT WRITE		
				3. Date Incorporated or Qualified 03/22/1996	3a. Date of Last Re	eport
2. Principal Place of Business 2. Mailing Address				4. FEI Number		oplied For
21 2805 E	EAST BAY DR	26 2805 EAS	A DAY DE	2. 59-338817a	人 No	ot Applicable
Suite, Apt. #, etc.	, , , , , , , , , , , , , , , , , , ,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
22		27		5. Continuate of Status Desired	Fee Re	quired
City & State 23 LARGO.	FR	City & State LACO	72	Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
24 ZIP 33777	Country USA	Zip 29 33771 3	OUNTRY OUSA	This corporation owes or has pain Personal Property Tax due June	30. 🗹 Yes 🗌	angible No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
XL CORPORATE SERVICES, INC.						
ALAR ALD UNITED ALBERT DALB				Address (P.O. Box Number is Not Adceptable)		
ORLANDO FL 32811				PASH. BAY CHE LOOKEH.		
J			83	of Enter 7	10	
			B4 City	100 - 21151 15/BY C	سار 85 Zip (Codo
			\ ST CITY L	-Ango	FL I [®] 多数	Code
11. Pursuant to the pro-	visions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing it	s registered
office or registered ecent. I am familiar	agent, or both, in the State of with, and accept the obligation	' Florida. Such change was au ons of, Section 607.0505, Flori	thorized by the corp da Statutes.	oration's board of directors. I hereby accep	t the appointment as	registered
/ · / / / / / / / / / / / / / / / / / /	ARL MAGN		1641 IV	CC-ND/IC	جرا ۱۵	197
	ped or printed name of registered agent of	and title if applicable (NOTE:	Registered Agent signature	equired when reinstating)	DATE	
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
TITLE D		▼ DELETE	1.1 TITLE		Change	Addition
NAME MAG N	IOTTA, DOMINICK		1.2 NAME			
STREET ADDRESS 340 C	ENTRAL AVENUE		1.3 STREET ADDRESS			
	E PLAINS NY 10803		1.4 CiTY-ST-ZiP			
TITLE		☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME			2.2 NAME	9000023	29239	5
STREET ADDRESS			2 3 STREET ADDRESS	9000023 -10/24/	9701030	007
CITY-ST-ZIP			2 4 CATY-ST-ZIP	****75().CO ****75	50.00
TITLE PRES		DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	maquotta		3.2 NAME			
STREET ADDRESS	outil AVE		3.3 STREET ADDRESS			
CITIF ST ZIP Whi	H Plain NY	10606	3.4. CITY - ST - Z#P			ĺ
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
N A ME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELET E	5.1 TITLE		☐ Change	Addition
NAME		•	5.2 NAME		-	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP	[N.	alaw 1/2/1/97	
TITLE		☐ DELETE	6.1 TITLE		/ D Change	Addition
NAME		-	6.2 NAME	1/	7/ <i>2[14]</i>	
STREET ADDRESS			6.3 STREET ADDRESS	, ,	72119	
	_		6.4 CITY-ST-ZIP		•	
CITY-ST-ZIP			0.4 OH 1-31-21P			

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.

CR2E0