2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

SIGNATURE REQUIRED

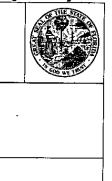
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P96000103402 **DOCUMENT #**

1. Entity Name

SIGNATURE:

BAY TERRACE APARTMENTS, INC.



FILED Jan 15, 2003 8:00 am Secretary of State 01-15-2003 90217 044 ***150.00

Principal Place of Business PO BOX 398656 MIAMI FL 33139			Mailing Address PO BOX 398656 MIAMI FL 33139						
2. Principal	Place of Busine	ess	3. Mailing Address					INTO THAT BURN	Palle III ier
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES		
City & State			City & State			4.	4. FEI Number 65-0722334 Applied For Not Applicable		
Zip	Zip Country		Zip Cou		ntry	5.	5. Certificate of Status Desired S8.75 Addit Fee Required		
6. Name and Address of Current Registered Agent						7.	Name and Address of New Registered	Agent	
LAL OLVIET					- Name				٠.٠. مرسسه
LAI, OI YUET					Street Address (P.O. Box Number is Not Acceptable)				
1311 97TH STREET BAY HARBOR ISLAND FL 33154								-	
DAT HADE	FL 33 134								
		٠			City		FL	Zip Cod	de
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						quied wile	9. Election Campaign Financing		00 May Be d to Fees
10.	OFFICERS AND DIRECTORS DP			11.		AC	DDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 11
STREET ADDRESS CITY-ST-ZIP	LAI, COSMO 1311 97TH S BAY HARBO		☐ Delete					☐ Change	☐ Addition
NAME STREET ADDRESS	TS LAI, OI YUE 1311 97TH S BAY HORBO		☐ Delete					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			ug is		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete					□ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CITY-	ET ADDRESS ST-ZIP			☐ Change	☐ Addition
of the corp	poration or the		e and accurate and that material to execute this report a				119.07(3)(i), Florida Statutes. I further cer legal effect as if made under oath; that I a da Statutes; and that my name appears ir		