

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010758

FILED
Apr 23, 2007
Secretary of State

Entity Name: BAYSIDE BRUSH CO.

Current Principal Place of Business:

1982 NW 82ND AVE
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

1982 NW 82ND AVE
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0736014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTILLO, JORGE E
1982 NW 82ND AVE
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CASTILLO, JORGE E
Address: 200 GREENWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DST () Delete
Name: LOPEZ-BOSCH, IVAN
Address: 8500 SW 112 STREET
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CASTILLO, JORGE E
Address: 200 GREENWOOD DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: TR (X) Change () Addition
Name: LOPEZ-BOSCH, IVAN
Address: 8500 SW 112 STREET
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVAN LOPEZ

TR

04/23/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date