## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

P97000017068 (2)

DOCUMENT # P97 1. Corporation Name BAYLLEI BUSINESS CORP. FILED
Jul 10 1998 8:00am
Secretary of State

BAYLL	EI BUSINESS COHP.					
Principal Plac	e of Business	Mailing Add	dress	<del></del> -		r i marindet vilk sanie Lades advist dater dater dater tader dater bligt führ enbr
4811 N.W. 79TH AVENUE 4811 N.W. 79TH AVENUE SUITE 01 SUITE 01						DO NOT WEITE IN THIS COMOS
MIAMI FL 33166 MIAMI FL 33166						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 02/24/1997
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number A/C Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						65-0749293 Not Applicable
22 27			рг. #, екс.			5. Certificate of Status Desired See Required
City & State City & State			State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip			Country			8. This corporation owes or has paid the current year Intangible
24	25 29 30		]		Personal Property Tax due June 30.  Yes X No	
	9. Name and Address of Cur	rent Registered Ag	ent			10. Name and Address of New Registered Agent
	<b>ALME</b> IDA, JAIR			81	Name	
4811 N.W. 79TH AVENUE Suite 01				82	Street Add	dress (P.O. Box Number is Not Acceptable)
	AMI FL 33166			83		
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent agenture regulated when reinstating)  OATE						
12.		AND DIRECTORS	, packet	13,	- Banada red	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE	·	Change Addition
NAME	ÕE ALMEIDA, JAIR			1.2 NAME		
STREET ADDRESS	4811 N.W. 79TH AVENUE,	SUITE 01		1.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166			1.4 CITY - ST	T-ZIP	
TITLE			DELETE	2.1 TITLE		Change Addition
NAME			I	2.2 NAME		
STREET ADDRESS				2.3 STREET	AODRESS	
CITY-ST-ZIP				2. 4 CITY - S	T - 24P	
TITLE		[	DELETE :	3.1 TITLE		☐ Change ☐ Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP		·····y		3.4 CITY-S	1-2IP	
TITLE		L	DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	1	•
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		DELETE	4.4 CITY- ST	r-ZiP	To
TITLE		L	DELETE	51 TITLE	-	☐ Change ☐ Addition
NAME			1	5.2 NAME		35
STREET ADDRESS	· •		1	5.3 STREET		7.10
CITY-ST-ZIP			Incienc	5.4 C(TY - ST	I - ZIP	I Oberes Addition
TITLE		L	DELETE	6.1 10TLE		Change
NAME				6.2 NAME		-07/13/9801107039
STREET ADDRESS	•			6.3 STREET	1	***150.00
CITY-ST-ZIP				6.4 CITY-ST	- ZIP	***13U.UU

14. I hereby certify that the information supplied with this fling 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 and ual report is true and accurate and that my signature shall have the same legal effect as it 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 attackment with an address.

5/26/98