

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093533

1. Entity Name
BAYFORCE ENTERPRISES, INC.

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90072 038 ***150.00

Principal Place of Business 5227-5TH ST., SOUTH ST. PETERSBURG FL 33705	Mailing Address P.O. BOX 14054 ST. PETERSBURG FL 33733-4054
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5227-5th St. So.	3. Mailing Address P.O. Box 14054
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State St. Petersburg, FL	City & State St. Petersburg, FL
Zip 33705	Country U.S.
Zip 33733	Country Pinellas

4. FEI Number 59-3545042	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**ROBINSON, JUANITA
5227-5TH ST., SOUTH
ST. PETERSBURG FL 33705**

7. Name and Address of New Registered Agent
Name **Juanita Robinson**
Street Address (P.O. Box Number is Not Acceptable)
5227-5th Street South
City **St. Petersburg** FL Zip Code **33705**

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.
SIGNATURE Juanita Robinson, CEO DATE 3/29/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO ROBINSON, JUANITA P.O. BOX 14054 ST. PETERSBURG FL 33733 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BRITTEN, PAUL A 661 - 27TH AVE S ST PETERSBURG FL 33712 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR JONES, ROBERT A 661 - 27TH AVE S ST PETERSBURG FL 33712 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juanita Robinson, CEO DATE 3/29/00 (727) 864-0461
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)