FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 149070 (5)BARFIELD INC. Principal Place of Business Mailing Address 4101 N.W. 29TH STREET 4101 N.W. 29TH STREET MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1946 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-0556588 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current pear Intangible 25 Personal Property Tax due June 30. 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change TITLE BARFIELD, J W NAME 1.2 NAME CR2E034 4101 N W 29TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI. FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELFTE Change Addition TITLE 2.1 TITLE LATHROP, HARRY A NAME 2.2 NAME 1478 CENTRAL AVE STREET ADDRESS 23 STREET ADDRESS atlanta ga CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MATHISEN, RAYMOND NAME 3.2 NAME 4101 NW 29TH ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI. FL 00000 CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition DEBRUN, PHILIPPE NAME 4. 2 NAME 4101 N W 29TH ST STREET ADDRESS 4.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE TAYLOR, JAMES G 5.2 NAME NAME 4101 NW 29TH ST STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 54 CITY-ST-ZIP

14. 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 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.

6.1 TITL€

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PAGANINI, MARC

4101 NW 29TH ST

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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DELETE

2-27-98 3058761668

Addition

Change