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DIVISION OF CORPORATIONS
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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # L43110 (0)

1. Corporation Name
BARGA INTERIORS, INC.

Principal Place of Business
2415 S. THIRD ST
3010 S THIRD ST #A
JACKSONVILLE BCH FL 32250
US

Mailing Address
1133 HAMLET CT
3010 S THIRD ST #A
NEPTUNE BCH FL 32266
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/12/1990** 3a. Date of Last Report **06/14/1994**

4. FEI Number **59-2979666** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt #, etc. 26 Suite, Apt #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARGA, NICHOLAS M
1133 HAMLET CT.
SUITE A
NEPTUNE BCH FL 32266

B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City **FL** B5 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 _____ DATE _____
Signature: Type or printed name of registered agent and title if applicable. DATE: Registered Agent Signature required when reappointing.

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
 NAME **BARGA, NICHOLAS M.**
 STREET ADDRESS **1133 HAMLET CT**
 CITY ST ZIP **NEPTUNE BEACH FL**

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY ST ZIP

TITLE **D**
 NAME **BARGA, CHRISTINE A.**
 STREET ADDRESS **1133 HAMLET CT**
 CITY ST ZIP **NEPTUNE BEACH FL**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY ST ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY ST ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY ST ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY ST ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY ST ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY ST ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY ST ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY ST ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed or on an attachment with an address.

SIGNATURE: *Nicholas M. Barga*
Name and Title of Current Registered Agent or Officer or Director

5-30-95 **904-246-2265**
Date Telephone