

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 FEB 27 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000039392 (4)**

1. Corporation Name

BARRY TAYLOR & ASSOCIATES INC.

Principal Place of Business

776 N.E. 76 STREET
MIAMI FL 33138

Mailing Address

776 N.E. 76 STREET
MIAMI FL 33138

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/26/1993** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0419373** Applied For Not Applicable

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

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

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

2. Principal Place of Business

21 **7310 BISCAYNE BL**

Suite, Apt. #, etc.

22

City & State

23 **MIAMI FL**

Zip

24 **33138**

Country

2a. Mailing Address

26 **7310 BISCAYNE BL**

Suite, Apt. #, etc.

27

City & State

28 **MIAMI FL**

Zip

29 **33138**

Country

30

9. Name and Address of Current Registered Agent

TAYLOR, BARRY
776 N.E. 76 STREET
MIAMI FL 33138

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7310 BISCAYNE BL

83

84 City

FL

85 Zip Code

33138

10. Name and Address of New Registered Agent

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

Barry Taylor Pres

(NOTE: Registered Agent signature required after 1/1/94)

2/20/95

12. OFFICERS AND DIRECTORS

TITLE **P**
NAME **TAYLOR, BARRY**
STREET ADDRESS **776 NE 76 ST.**
CITY - ST - ZIP **MIAMI FL 33138**

TITLE **V**
NAME **TAYLOR, DOROTHY C**
STREET ADDRESS **115 LAKE RIDGE DR.**
CITY - ST - ZIP **FOREST VA 24551**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS **7310 BISCAYNE BL**
14 CITY - ST - ZIP

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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 112.701, 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.

SIGNATURE:

Barry Taylor Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/95

305 757 4207