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PROFIT CORPORATION ANNUAL REPORT

1997

BAR-EL INC



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 264040

(7)

FILED Feb 04 1997 8:00am Secretary of State

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Principal Piac 7920 S.W. 143 MIAMI FL 3315	Mailing Address 7920 S.W. 143 STREET MIAMI FL 33158-1573	143 STREET								
						3. Date Incorporated or Qualified 10/30/1962		ate of Last R 01/1996	leport	
2. Principal F	Place of Business	2a. Mailing Address 26		*******		4. FEI Number 59-0979514			oplied For ot Applicable	
Suite, Apt #, etc. Suite, A 22 27 City & State City & S		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired	
		City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Ζ ₁ ρ	Country 25	Z(μ)	30	ntry		8. This corporation has liability fo Florida Statutes	r intangible		199,032,	
	9. Name and Address of Current	Registered Agent			····	10. Name and Address of New R	egistered /	Agent		
SH/	APIRO, CLAIRE S.			81	Name					
7920 S.W. 143 STREET MIAMI FL 33158				82	Street Ad	dress (P.O. Box Number is Not Accepta	ess (P.O. Box Number is Not Acceptable)			
•				83						
				84	City		FL	85 Zip	Code	
office or i	registered agent or both, in the State and familiar with, and accept the obligations from the state of the st	of Florida Such change was tions of, Section 607,0505, F	authorize Iorida Stat	d by lutes	the corpor	orporation submits this statement for the ation's board of directors. I hereby acc gured when reinstang)	parpose or ept the app	ointment as	registered	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 12	
TITLE	TD	DELETE	1.1 TI	ΙLΕ				Change	☐ Addition	
NAME	SHAPIRO, SCOTT H.		1.2 N/	AME						
STREET ADDRESS	9874 N.W. 2ND COURT		1.3 ST	REET	ADDRESS					
CHY-ST-ZIP	PLANTATION FL		1.4 CI	TY-S	1-21P					
TITLE	PSD	☐ DELETE	2.1 10	ĭL€	\ \			Change	Addition	
NAME	SHAPIRO, CLAIRE S		2.2 N/	AME						
STREET ADDRESS	7920 S.W. 143 STREET		2.3 \$1	REET	ADDRESS					
CITY - S1 - ZIP	MIAMI, FL 00000	T occur			T-ZIP		· 	Chause	T Addition	
TIDLE	VD Shapiro, Barry E	☐ DELÉTE	3 1 TI					Change	Addition	
NAME CONTELLED DESCRIPTION	7920 S.W. 143 STREET		3.2 N/		Aboncee					
STREET ADDRESS	MIAMI, FL 00000				ADDRESS					
CITY-ST-ZIE	MEWIL FL VVVV	DELETE	34 C		ST-ZIP			Change	Addition	
NAME		T1 MILL	4 1 II		ĺ			- Priorigo	1.000(0)	
STREET ADDRESS					ADDRESS	•				
CITY-ST-7IP					T-ZIP					
THLE		DECETE	51 Ti		-			Change	Addition	
NAME			5 2 NJ							
STREET ADDRESS					ADDRESS				}	
CITY-ST-ZIF			5 4 CI							
TITLE		DELETE	6.1 1		····		****	Change	Addition	
NAME.		•	6.2 N		-					
STREET ADORESS					ADDRESS					
City-S1-ZiP			6.4 CI							

14. If do hereby certify that the information supplied with this filling 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.

p. Pres Claire S. Shapiro 1/27/97