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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 321250

(3)

BARCO & WILLIAMS, INC.

FILED Apr 30 1997 8:00am Secretary of State

10450 SAN JOSE BLVD. JACKSONVILLE FL 32257	67	Place of Business Mailing Address			1			AIAN AIAN ISD
					3. Date Incorporated or Qualified 09/25/1967	3a. Dat	e of Last	
2. Principal Place of Business	2a. N	Mailing Address			4. FEI Number			Applied For
21	26				59-1216753			Not Applicable
Suite, Apt. #, etc. 22	S	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State	C	City & State	-Profit-t-t-rest-M-11-Manual-		6. Election Campaign Financing		\$5.0	0 May Be
23	28				Trust Fund Contribution			d to Fees
,,,	Country Z	?ip	Countr	ry	8. This corporation has liability for			s. 199.032,
24 25	29		30	 		Yes _		
	Address of Current Register	red Agent	8.	1 Name	10. Name and Address of New Re	gistered A	gent	
WILLIAMS, WALTI			ľ	Name				
10450 SAN JOSE			83	2 Street Ad	ldress (P.O. Box Number is Not Acceptab	ole)		MI L. J. J. 124 (M.) Li
JACKSONVILLE F	L 02201		e:	3				
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			84	4 City		FL	85 Z	p Code
11 Days and to the second force	of Coolean 607 of 00 and 607	1 1EOO Electric Ct-1	uton the stre	10 000000	orporation submits this statement for the p	· · · · · · · · · · · · · · · · · · ·		a lin samistana
SIGNATURE Signature Typed or por	nd accept the obligations of, §	applicable (NC	D1E: Registered A		guired when reinstating)	DATE		EE2 11.7.2
12. 1014 PD	OFFICERS AND DIRECT		13.		ADDITIONS/CHANGES TO OFFIC			··· page
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It is 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 the same legal effect as if made under oath; that I am an officer or director of the corporation or the recovery or trusters empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, of on an attachment with proaddress.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

425/97 904-262-248