FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 352140

BACARR INC

•							
Principal Place of Business Mailing Address 1265 28TH AVENUE W. 1265 28TH AVENUE W.							
BRADENTON FL 34205-6923 BRADENTON FL 34205-6923						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed 09/12/1969	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied Fo	or T
26						59-1272170 Not Applica	able
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additiona	al
22		27	27			5. Certificate of Status Desired Fee Required	
City & State	e .	City & State	City & State			6. Election Campaign Financing \$5.00 May Be	,
23		28				Trust Fund Contribution Added to Fees	\longrightarrow
ZipCountry			Zip Cou			-8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No	
24	25	29	30			Personal Property Tax. LIYes LINo 10. Name and Address of New Registered Agent	
.	9. Name and Address of Co	urrent Registered Agent		81	Name	10. Name and Address of New Registeres Agent	
CAR	r, jesse d.		ļ				
1265-28TH AVE W BRADENTON FL				82	Street A	Address (P.O. Box Number is Not Acceptable)	
				83			
				84	City	FI 85 Zip Code	ĺ
agent. I a SIGNATURE	m familiar with, and accept the o	bligations of, Section 607.0505, Fig	inda Stati	ites.	•	oration's board of directors. I hereby accept the appointment as registered	-
12.	OFFICER	S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE	PSD DELETE CARR, JESSE D.			1,1 TITLE		Change 🗀 Ad	ddition {
NAME				ME			ļ
STREET ADDRESS	1265 28TH AVE W		1.3 STREET ADDRESS		ADDRESS		1
CITY-ST-ZIP	BRADENTON FL	- Delete		1.4 CITY-ST-ZIP		Change ☐ Ac	ddition
TITLE	CARR, JESSE D JR.			2.1 TITLE 2.2 NAME		7 -	udido
NAME						3006- 19Th AVENUE EAST	
STREET ADDRESS	DALMETTO EL			2.3 STREET ADDRESS 7		19006- 69Th AVENUE EAST BRADENTON, FL 34202	
CITY-ST-ZIP			2. 4 C		it-ZIP	Change Ac	ddition
TITLE NAME			3.1 NA				
STREET ADDRESS					ADORESS		
CITY-ST-ZIP			3.4. CI				
TITLE		☐ DELETE	4.1 TI	_		☐ Change ☐ Ad	ddition
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET	ADDRESS		
CITY-ST-ZIP			4.4 CI	TY-SI	T-ZIP		
TITLE		☐ DELETE	5.1 TF			Change Ac	ddition
NAME			5.2 NA				
STREET ADDRESS					ADDRESS	,	,
CITY-ST-ZIP			5.4 CF		T-ZIP	☐ Change ☐ Ac	ddition
TITLE	İ	□ nei èté	6.1 TT	ILE		Change Ac	JUNUUN !

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90134 022 ***150.00