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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

415531

(3)

BARBIZON SCHOOLS OF MODELING AND FASHION, INC. Principal Place of Business Mailing Address 782 N.W. LEJEUNE RD. STE 333 782 N.W. LEJEUNE RD. STE 333 MIAMI FL 33126 MIAMI FL 33126 3. Date Incorporated or Qualified 3a. Date of Last Report 12/28/1972 03/23/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1433122 Not Applicable Suite: Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required Oty & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 П Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes VNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROBERTS, R. S. 82 Street Address (P.O. Box Number is Not Acceptable) 10205 COLLINS AVE APT PH3 **BAL HARBOUR FL 33154** 83 84 City Zip Code 11. Fursuant 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typica or prince many of registered agent and fitte it applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE PD DELETE 1 1 TITLE ☐ Change ☐ Addition ROBERTS, R.S. NAME 1.2 NAME 782 LEJEUNE RD. STREET ADDRESS. 1.3 STREET ADORESS CITY - ST - ZIF MIAMI FL 1.4 CITY-ST-ZIP 1(T: F DELETE 2 1 TITLE Change ☐ Addition NAME ROBERTS.INGA 22 NAME 782 LEJEUNE RD. STREET ADDRESS 23 STREET ADDRESS MIAMI FL (015V - \$1 - 712) 2 4 CITY - ST - ZIP THE VD: DELETE 3 1 THTLE Change ☐ Addition CARNEY, LANA NAME 3.2 NAME 782 LEJEUNE RD. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL OTY-S1-200 34 CITY-ST-ZIP Title F DELETE 4 1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST ZIE 44 CITY - ST-ZIP THLE DELETE 5 1 THUE Change ☐ Addition NAME 5.2 NAME STREET ACIDRESS 5.3 STREET ADDRESS CHY ST ZiP 5 4 CITY - ST - ZIP THEF DELETE 6 1 TITLE ☐ Change ☐ Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS OPY-ST-ZIP 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.