

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F93000003897 (6)

1. Corporation Name

BARRIER SYSTEMS, INC.

Principal Place of Business

1100 EAST WILLIAM STREET, #206
CARSON CITY NV 89701

Mailing Address

1100 EAST WILLIAM STREET, #206
CARSON CITY NV 89701

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

08/26/1993

3a. Date of Last Report

06/19/1996

4. FEI Number

68-0023098

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PCD
DUCKETT, JOHN W
4901 NUMAGA PASS
CARSON CITY NV 89701

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
FRANK, H. JONATHAN
730 JOYCE LANE
INCLINE VILLAGE NV 89452

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
O'CONNELL, THOMAS C JR.
17600 HWY. 238
GRANTS PASS OR 97527

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
REED, WILLIAM G
935 BLEMER ROAD
DANVILLE CA 94526

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
SLADEK, RICHARD
2481 SOUTHVIEW DRIVE
ALAMO CA 94507

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
D
WOOD, EDWIN M.
570 CHICO COURT PO BOX 4840
INCLINE VILLAGE, NV 89450-4840

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE

SIGNATURE REQUIRED

APPROVED AND FILED

1997 JUL 23 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (4/97)

pg 2 of 2

BARRIER SYSTEMS INC.

July 21, 1997

~~Certified - Return Receipt~~

Airborne 

Division of Corporations
Annual Reports
PO Box 6327
Tallahassee, FL 32314

Ref: F93000003897 (6)

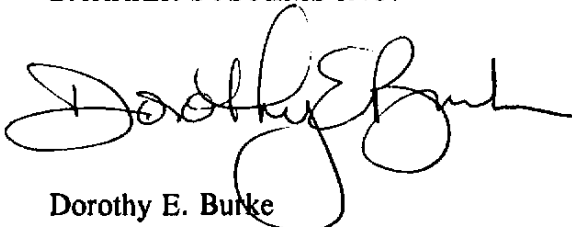
Good morning,

We enclose our 1997 Profit Corporation Annual Report along with our check for \$165.00. We never received a first report, only the 2nd Notice, which we received July 17. When we checked our records, the same thing happened last year... we never received the first notice, the 2nd Notice was received and processed June 12, 1996. Last year's late fee was only \$25.00 and we paid it. This year the late fee is \$385.00, and based on the fact that we have a repeat history of not receiving the first notice, we respectfully request that the late fee be waived.

We thank you for your consideration.

Sincerely,

BARRIER SYSTEMS INC.



Dorothy E. Burke

/ms