Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90144 047 ***150.00

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 # F94000002932

1. Corporation Name

BERRYMAN & HENIGAR ENTERPRISES, INC.

										1 00 11810 1801 1008
Principal Place of Business Mailing Address										
11590 W. BERNARDO COURT			11590 W BERNARDO COURT							
Suite 200 San Diego Ca 92127			Suite 200 San Diego Ca 92127				DO NOT WRITE IN THIS SPACE			
US			US				3. Date Incorporated or Qualifed			
							06/06/1994			
2. Principal P	ace of Business	2a.	Mailing Address				4. FEI Number		\Box	Applied For
21		26					33-0601927			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional
22			27						Fee	Required
City & Stat	8		City & State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			ed to Fees
Zip	Country		Zip	Cou	ntry		8. This corporation owes the current ye	_		
24	25	29	·	30	· · · ·		Personal Property Tax.		Yes	□No
	9. Name and Address of Cu	rrent Regis	tered Agent		81	Name	10. Name and Address of New Regis	rated W	Jenr_	
LIEM	ICAD DOREDT I				"	Name				
HENIGAR, ROBERT L						Street Addr	eet Address (P.O. Box Number is Not Acceptable)			
640 E HIGHWAY 44 CRYSTAL RIVER FL 34429										
UNI	SIAL NIVEN FL 34429				83					
					84	City			85 Zi	ip Code
					أا			<u>FL</u>	<u></u>	itl-td
office or r	to the provisions of Sections 607 egistered agent, or both, in the Si m familiar with, and accept the ob	tate of Florid	ia. Such change was	autnorized	ו עם נ	ine corporatio	oration submits this statement for the purpo on's board of directors. I hereby accept the	appoint	nent as	registered
SIGNATURE							D	TE		
12.	Signature, typed or printed name of registered	S AND DIRE		13.	Ageni	signature require	d when reinstating) OA ADDITIONS/CHANGES TO OFFICE		DIREC	TORS IN 12
	PC	MIND DINE	☐ DELETE	1,1 TI	n F		7.00		Chang	
TITLE	, v -			1.2 N		ļ				
NAME	BERRYMAN, RAY J	DT #200		1		ADDRESS				
STREET ADDRESS	11590 W BERNARDO COU	NI #200			TY-ST					i
CITY-ST-ZIP	SAN DIEGO CA		□ DELETE	2.1 TT		-2119			Chang	e Addition
TITLE	S DEDDVAMAN MADY I		- Joenne	2.2 N		Ì			_ `	
NAME	BERRYMAN, MARY J 11590 W.BERNARDO COYI	DT #200				ADDRESS				İ
STREET ADDRESS	SAN DIEGO CA	ŭ1_#200_			ITY-SI		ر به به مواد پی <u>نیستو</u> ب ینیستو پینیستو			
CITY-ST-ZIP	TD		☐ DÉLETE	3.1 TI		1-21-			Chang	ge
				3.2 N						
NAME STREET ADDRESS	rodriguez, Jon A 11590 West Bernardo C	ים וחי	nva			ADDRESS				
STREET ADDRESS		/UUN1 #21	UU	1						-
TITLE	SAN DIEGO CA 92127		☐ DELETE	3.4. C	nY-S πF	1-211-			Chang	ge Addition
	~·			4.2 N						
NAME STREET ADDRESS	HENIGAR, ROBERT L 640 EAST HIGHWAY 44					ADDRESS				Į
		n								. 1
CITY-ST-ZIP TITLE	CRYSTAL RIVERS FL 34428		☐ DELETE	5.1 TI	TY-ST TLE) V		Chang	ge Addition
				5.2 N			(VANDAL SCOTT 1590 W BERNARDO (AND PIEGE, CA. 9	/		
NAME CTREET ADDRESS	Ket 19					ADDRESS	1590 W BERNARDO	01) K	: 200	}
STREET ADDRESS					TY-ST	-ZIP (CAND DIEGO CA 9	12/2	7	Į
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TI)		Chang	ge Addition
NAME			_ ====,,,	6.2 N	AME	F	RIERY, MICHElle		_	7
						ADDRESS //	190 W. RERNIA ROA	CT. 1	420	o l
STREET ADDRESS	i							/		J

14. I 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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP