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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600003087 (1)

BARRYMORE HOLDINGS INC.

Principal Place of Business Mailing Address				I SOUTHER THE FOUND OSSIL BOTH BOTH BOTH BOTH BOTH BOTH BOTH BOTH	
290 - 174 ST & MIAMI BCH FL		290 - 174 ST #1510 Miami BCH FL 33160-325	52		
				3. Date incorporated or Qualified 06/19/1996	3a. Date of Last Report
2. Principal Place of Business		28. Mailing Address		4. FEH Number	Applied For
21 Suite Ast # sts		[26]		65-0672282	Not Applicat
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Ζφ	Country	8. This corporation has liability for it	ntangible tax under s. 199,032,
24	25	29	30		Yes No
	9. Name and Address of Curre	int Registered Agent	81 Name	10. Name and Address of New Reg	jistered Agent
	VARDS, NADIA S CPA				
290 - 174 ST #1510 MIAMI BCH FL 33160			82 Street Add	fress (P.O. Box Number is Not Acceptab	le)
MIM	MIDON PL 33 100		83		·
			<u></u>		T-1 7-0-4
			84 City		FL 85 Zip Code
agent. I ar SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or pointed home of registered as	gations of, Section 607.0505, F		X X	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPS	LLI DELFTE	1,1 11111		Change Additi
NAME	EDWARDS, NADIA S 290 - 174 ST #1510		1.2 NAME		
STREET ADDRESS	MIAMI BCH FL 33160		1.3 STREET ADORESS		
CITY-ST-ZIP TITLE	MAKIN POLLI P AGIAA	DOLLETE	1.4 GHY-\$1-7IP 2.1 JHH		Change Additi
NAME	r		2.2 NAME		
STREET ADDRESS	r		2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CHY+ST-7IP		
TITLE		DELETE	3111111		Change Additi
NAME			3 2 NAME		
STREET ADORESS	r		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	34 City-St-Zir		Change Addili
NAME	r	FT 0011 - E	4 2 NAME		fin grounds fin transmi
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	r		4.4 CHY- S1-2IP		
TITLE		DETETE	5.1 111116		Change Addili
NAME	r		5.2 NAME		
STREET ADDRESS	r		5 3 STREET ADDRESS		
CITY-ST-ZIP		There ex	5.4 CHY-ST-ZIP		
TITLE		L DELETE	6.1 11735		Change Additi
NAME	; }		6.2 NAME		
STREET ADDRESS	I		6.3 STHEFT ADDRESS		
CITY-ST-ZIP	ov certify that the information suppli	ind with this filing doos not qua	alify for the exemption state	ed in Section 119.07(3)(i), Florida Statutes	s. Hodher certify that the
information I am an of appears in	n indicated on this annual report or fficer or director of the corporation in Block 12 or filock 13 if charger.	supplemental argual report is the receiver of hustee empe or on an attachment with an ar	strue and accurate and tha owered to execute this repo ddress	at my signature shali have the same lega ort as required by Chapter 607, Florida S	I effect as if made under oath; t Satutes; and that my name