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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F96000006164 (5)

BALI BATIKS, INC.

Principal	Piace	of	Busir	iess

Mailing Address

## **FILED** May 02 1997 8:00am Secretary of State



342 hard street Harahan La 70123		342 HARD STREET HARAHAN LA 70123-4118			•				
					Date Incorporated or Qualified 11/25/1996	Sa. Date of Last Re	ap <b>o</b> rt		
2. Principa' Pl	lace of Business	2a, Mailing Address		· · · · · · · · · · · · · · · · · · ·	4. FEI Number	I Ac	plied For		
21 56/2	e craw ford St	26 Same		72-1316745	<del>  </del>	t Applicable			
Suite, Apt.		Suite, Apt. #, etc.	·····	<del></del>		- \$9.75 A			
22 Jul	ite A	27		5. Certificate of Status Desired	Fee Required				
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be					
23 16	ahan La	28			Trust Fund Contribution				
70	Country	Zip	Count	'y	8. This corporation has liability for intangible tax under s. 199.032,				
24 <b>- 10</b> 56		29	30			Yes No			
	9. Name and Address of Current	Registered Agent		1 1	10. Name and Address of New Re	Jistered Agent			
	NEY, JOSEPHINE		8	1 Name					
1113 ESTERO BLVD., STE 8 FT MYERS FL 33931			8	82 Street Address (P.O. Box Number is Not Acceptable)					
ri M	TENS PL 33831		8	3					
			-	4 City		85 Zip (	Code		
			°	+ City			Joue		
office or re	to the provisions of Sections 607.0502 eg stered agent, or both, in the State o m farn-har with, and accept the obliga	of Florida, Such change was	authorized l	by the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of changing it it the appointment as	s registered registered		
SIGNATURE	Signature, typod or printed name of registered agen	Land title if applicable (NO	E: Regislered A	gent signature rec	guired when reinstating)	DATE	<del></del>		
12.	OFFICERS AND	~~~~ <del>~~~~</del>	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	IS IN 12		
TITLE	PTCD	DELETE	1.1 TITLE			Change	Addition		
NAME	TIERNEY, SANDRA		1.2 NAMI	<u> </u>					
STREET ADDRESS	342 HORD ST		1.3 STRE	EY ADDRESS					
City-St-Zip	HARAHAN LA		1.4 CITY						
TITLE	S	DELETE	2.1 TITLE	<del></del>		Change	Addition		
	TIERNEY, JOSEPHINE	<u> </u>	2 2 NAM						
NAME DISCEL NORMESS	1113 ESTERO BLVD., STE 8			ET ADDRESS	W.	· •			
STREET ADDRESS	FT MYERS FL			1		•••			
CITY-SI-ZIP	FI MICHO FE	DELETE	3.1 Trite	-ST-ZIP		Change	Addition		
TIDLE		C pecut				land Onlings			
NAME			3.2 NAM						
STREET ADDRESS			1	ET ADDRESS			1		
CITY - ST - ZIP		☐ DELETE		-ST-ZIP		Change	Addition		
THEF		L_ ottete	4.1 TITLE				Addition		
NAME			4. 2 NAM						
SZERUCA LEHTS				ET ADDRESS					
CITY-ST-7IP		P.P. P.P.	4.4 CITY			[T] 05	10000		
TITLE		DELETE	\$ 1 TITLE	. 1		Change	Addition		
NAME			5.2 NAM	E					
STREET ADORESS			53 STRE	et address					
CHTY-ST-Zif*			5 4 CITY	-ST-ZIP					
t TLF		☐ DELETE	6 1 TITLE			☐ Change	Addition		
NAME			6.2 NAM	E					
STREET ADORESS			6.3 STAE	et address					
CITY-ST-ZIF			6.4 CiTY	-ST-ZIP	•				
OHT-OF-AR	h	with this filing does not supl			ted in Section 119 07/3/(i) Florida Statute	e. I further earlifu that	tho		

I do neceby 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 13 if changed, or on an attachment with an address.

Daytime Phone # 0011759