

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90055 049 ***150.00

DOCUMENT # F99000003980

1. Entity Name

BAS ACCOUNTING & CONSULTING GROUP INC.



Principal Place of Business

16212 BOTHELL-EVERETT HWY
PMB #F257
MILL CREEK WA 98012

Mailing Address

16212 BOTHELL-EVERETT HWY
PMB #F257
MILL CREEK WA 98012

34068552



MOORE

CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

114 Varsity Circle

City & State

City & State

Altamonte Springs, FL

Zip

Country

Zip

Country

32714-2833

USA

4. FEI Number

91-1428650

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLANAGAN, ROBERT J
114 VARSITY CIRCLE
ALTAMONTE SPRINGS FL 32714

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: CPT ☐ Delete
NAME: FLANAGAN, ROBERT J
STREET ADDRESS: 114 VARSITY CIRCLE
CITY-ST-ZIP: ALTAMONTE SPRINGS FL 32714

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: S ☐ Delete
NAME: FLANAGAN, JENNIFER R
STREET ADDRESS: 1238 RESACA ST
CITY-ST-ZIP: PITTSBURGH PA 15212

TITLE: ☐ Change ☐ Addition
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CITY-ST-ZIP: ☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *RJ Flanagan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert J. FLANAGAN, President 4.5.04 407.788.9301

Date

Daytime Phone #