FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # H202 1. Corporation Nanie	61 (4)	······································		
AL BARSHOP, INC.			 	8) 848)) 8/80) 8/80) 8/80) 8/80) 8/80)
Principal Place of Business	Maling Address			
1500 S.E. 3RD COURT SUITE #103 DEERFIELD BEACH FL 33441	1500 S.E. 3RD COURT SUITE #103 DEERFIELD BEACH FL 33441		Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address		09/10/1984 4. FET Number	01/19/1995 Applied For
m 1300 E. Hillsboro Blud		illsboro Blud.	59-2446460	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	l	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	Rad Fl	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for in	langible tax under s. 199.032,
33441 25 Broward		30 Brownd	Florida Statutes 🔲 Yes	No
9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New Re	gistèred Agent
DADOLIOD AL OD CANDOA				
BARSHOP, AL OR SANDRA 6534 CONTENPO LANE		82 Street Addre	ess (P.O. Box Number is Not Acceptable	O)
BOCA RATON 33433		83		, , , , , , , , , , , , , , , , , , , ,
		84 City		85 Zip Code
or registered agent, or both, in the State of familiar with and accept the obligations of, \$ SIGNATURE	Section 607.0505, Florida Statutes.	a by the corporation's board Figure April square is not a 13. 1.1 THE		DATE
NAME BARSHOP, AL		1.2 NAME		
STREET ADDRESS 6534-CONTENPO LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP BOCA RATON FL	El progra	1.4 CITY - ST - ZIF		Cossos
DARROLLOR CANDRA	DELETE	2 1 TITLE 2 2 NAME		Change Addition
NAME BARSHOP, SANDRA STREET ADDRESS 6534 CONTENPO LANE		2 3 STREET ADDRESS		
CITY-ST-ZIP BOCA RATON FL		2 4 Ci1Y - \$T - ZiF'		
THILE	☐ DELETE	3 1 TIFLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS 3.4 CITY - SE- ZIP		
CITY-ST-7IP TITLE	DELETE	4 1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-7IF		4.4 CITY-ST-7IP		Change Addition
TITLE	DELETE	5 1 HTUE 5 2 NAME		Change Addition
NAME STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-7IP		5.4 CITY - S1 - ZIP		
TITLE	☐ DELF1E	6 1 1 1 1 1 6		Change Addition
NAME		6.2 NAME		
STREET ACCURESS		6.3 \$THEET ADDRESS		
CITY-ST-ZIP 14. I do hereby certify that the information supply	Sincl with this files is voluntaria furnis	shod and does not qualify for	or the exemption stated in Section 119 (07(3)(k), Florida Statutes, I further
 I do hereby certify that the information stupped cortify that the information indicated on this path; that I am an officer or director of this cappears in Block 12 or Block 13 4 changed. 	annual report or supplemental annu opporation or the receiver or trustee	al report is true and accura empowered to execute this	te and that my signature shall have the :	same legal effect as it made under irida Statutes; and that my name
SIGNATURE:	D ALVIN BAR ED OR PRINTED NAME OF SIGNING OFFICER	S HOP FOR DIRECTOR	3/20/96	954-570- [30 Daytin & Priore #