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

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

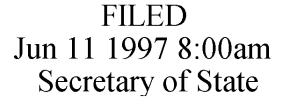
Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # J58171

(6)

## <del>B Bar z Incorporated</del>

DUATIO DUIDULVINIDON TOCO	ZAVITZ	ENTERPRISES,	INC.
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Principal Plac	Place of Business Mailing Address						1 1981115 OLDS DESOT SOIGS STOLL FEBRE HIGH OLDS 1 DIDIT DIDIT DIDES DIGES DIDIT SEBS							
% FREDERICK T. ZAVITZ  \$556 PALMER BLVD.  \$ARASOTA FL 34232  \$ARASOTA FL 34232-2734														
•••••									3. Date Inc 02/20/	1987	or Qualified		te of Last F )1/1996	Report
	Place of Business		2a. Mailin	-					4. FEI Nun				A	pplied For
				Route 1				59-2791662				N	lot Applicable	
Suite, Apt.	#, etc.		Suite,	Apt. #, etc.				- 1	<ol><li>Certifica</li></ol>	ate of Status	Desired			Additional
22			27 Box 84										Fee R	lequired
City & Stat	le		City & State					6. Election		•			May Be	
23			28 Waul	oan,	MN					nd Contribu	• • • • • • • • • • • • • • • • • • • •	<u> </u>		to Fees
Zip	— ·	ountry	Zip			ountry		ŀ		•	s liability for		_	s. 199.032,
24	25	ddress of Current R	29 565	39	30	<u>US</u>	<u>A</u>	I		Statutes	s of New Re	Yes [	_	
7416			redistated w	r Deur		81	Nama		·			gistered A	gent	
	TTZ, FREDERICK					"	F	Robe	ert W.	Darn	ell			
	6 PALMER BLVD.					82	Street A	Addres	s (P.O. Box	Number is l	lot Acceptal	ble)		
SAR	iasota FL 3423	2						2033	Main	Stre	et			
		•				83	5	Suit	e 406					
						84	Car						B5 Zip	.Code_
	<u> </u>								sota			<u>FL</u>		1237
11. Pursuant	to the provisions of	Sections 603 0502 probable of the objection in the state of the objection in the objection of the objection	nd 607.1508	Florida Statut	es, the Buthoriz	ebove.	-named the cord	corpora	ation submit	s this stater	nent for the parent	ourpose of	changing i	its registered
agent. I a	m familiar with, and	SCOOL INCOME	ns of, Section	on <u>607 0</u> 5 <b>05</b> , Fi	orida Si	talutes.	ine corp.	·	Λ	4.	ioloby acco			s registered
SIGNATURE		4777							Dane			619	1197	I
	Signature printe			ole (NOT			nt signature	required t	when reinstating)			DAGE		
12.	тв	OFFICERS AND D	PIRECTORS	DELETE	13				ADDITIO	NS/CHANG	ES TO OFFIC		Change	RS IN 12 Addition
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CITY-ST-ZIP					6.4	CITY-ST	- ZIP							0/11///

I do 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 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 changed, or on an attachment with an address.