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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J61234

BARELK CORPORATION

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90107 034 ***150.00

Principal Plac	ce of Business	Mailing Address			HI OLDIY OLDIY BIRYI OLDIY OYDIY 1801
1010 N. BARFI	ELD DRIVE	1010 N. BARFIELD DRIVE			
MARCO ISLAND FL 33937 MARCO ISLAND FL 33937					
1				DO NOT WRITE IN TH	HIS SPACE
	•			3. Date Incorporated or Qualifed	
				03/10/1987	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0035449	Not Applicable
Suite Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22				U. Commodio of Cialdo Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	☐ Yes ☐ No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Currer	it Registered Agent	81 Name	10. Name and Address of New Registere	ed Agent
πıc	VED E GIENN		81 Name		
TUCKER, E. GLENN 950 N. COLLIER BLVD., SUITE 204			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	RCO ISLAND FL 33937				
MAD	ICO ISDAND PE 33937		83		
			84 City		85 Zip Code
				F	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above-named cor	poration submits this statement for the purpose	of changing its registered
agent. 1 a	egistered agent, or both, in the State im familiar with, and accept the obliga	ot Florida. Such change was aut itions of, Section 607.0505, Flori	tnonzed by the corporat da Statutes.	ion's board of directors. I hereby accept the app	pointment as registered
SIGNATURE		,			•
SIGNATURE					
	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F	Registered Agent signature requir	red when reinstating) DATE	
12.		nt and title if applicable. (NOTE: F ND DIRECTORS	Registered Agent signature requirement 13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.					AND DIRECTORS IN 12 Change Addition
	OFFICERS AN	ID DIRECTORS	13.		
TITLE	OFFICERS AN	ID DIRECTORS	13. 1.1 TITLE		
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14. 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 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, with all other like empowered.

SIGNATURE:

DEGUAL OF A PERSONAL PROPERTY OF A PARTY OF

4/26/99 642-8880

R2E024 (11/05