

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

05-01-2008 90245 007 \*\*\*\*\*11.25


**FILED**  
191784

08 JUL -7 PM 1:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # J91784**

1. Entity Name  
**BAR DEL, INC.**



Principal Place of Business <b>4520 NORTH BRISTOL COURT NICEVILLE, FL 32578 US</b>	Mailing Address <b>4520 N BRISTOL CT NICEVILLE, FL 32578 US</b>
---	--

**DO NOT WRITE IN THIS SPACE**



03302008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>58-2850245</b>	Applied For Not Applicable
5. Certificate of Status Decead <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BARNIV, CHARLES B  
4520 N. BRISTOL COURT  
NICEVILLE, FL 32578**

**DO NOT WRITE IN THIS SPACE**

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 reelecting) ONE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	1000000888877 04722708-80022-013 138.75
---	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVTS BARNIV, CHARLES B 4520 N. BRISTOL COURT NICEVILLE, FL 32578</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 807, 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: CHARLES B. BARNIV 3/29/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #