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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham .

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K43148

(1)

ROBERT BARE & ASSOCIATES, INC.

FILED Mar 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						*	IB(4 A181) BEBU B	JOH DIEH BIBI	1 81011 1001
% ROBERT G 7457 NW 4TH PLANTATION	<b>†</b> 8T	7487 N.W. 4TH STREET 7457 NW 4TH ST PLANTATION FL 33317			DO NOT WRITE IN THIS SPACE				
		US			Ī	<ol> <li>Date Incorporated or Qualified</li> <li>11/03/1988</li> </ol>	i		
2. Principal P	Place of Business	2a. Mailing Address	· <del></del>			4. FEI Number		Ar	oplied For
21 700	W Hillstoro Blud	26 SAME				65-0081051		No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		}	5. Certificate of Status Desired		•	Additional	
22 Bldg City & Stat	ate Suitt 104 27 SAME City & State					<u> </u>			equired
23 Dec	efield Breen Fr	28 SAME				Election Campaign Financing     Trust Fund Contribution		Added	
Zip _	Country 7 25 USA	71p SAME 30	Country			<ol> <li>This corporation owes or has personal Property Tax due Jur</li> </ol>			angible No
24]	9, Name and Address of Current	1201	' <del>'</del>			10. Name and Address of New F			
RA	re, robert g.		81	Name		RE, RIBERT 6.		<del></del>	
7457 NW 4TH ST					Addres	ss (P.O. Box Number is Not Accept	able)	<del></del>	
PLANTATION FL 33317						Hillsboeo Blud Bldg		6 104	
-1			83						
			84	City				85 Zip (	Code
		<del>_</del>			<u>kerf</u>	field beach	<u>FL</u>	334	441
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State our familiar with, and accept the obligations.	f Florida. Such change was auth	orized by	the corp	corporation	ration submits this statement for the n's board of directors. I hereby acc	purpose of o	changing It intment as	registered registered
SIGNATURE									
	Signature, typed or printed name of registered agent		·	nt signature	required:	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIDECTOR	C IAL 40
12.	OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO OFF		Change	Addition
NAME	D Bare, Robert G.	partition in	1.2 NAME		D	E ROBERT O.	•	EN CHAINE	7,600,11011
STREET ADDRESS				3 STREET ADDRESS 700		W Hillsboru Blvd. Bldg	4 Stile	104	
CITY-ST-ZIP						rfield Brach, FL 33			\ <u>'</u>
TITLE	TOMANOWIE	DELETE	2.1 TITLE	1-24				Change	Addition
NAME			2 2 NAME						
STREET ADORESS			23 STREET	ADDRESS					]
CITY-ST-ZIP			2.4 CITY-5	T-2IP			2.2		
TITLE		☐ D€L€TE	3.1 TITLE				T	Change	Addition
NAME			3.2 NAME						ĺ
STREET ADDRESS			3.3 STREET	address					}
CITY-ST-ZIP			3.4. CITY- 5	T-ZIP					
TITLE		☐ DELETE	4.1 TITLE				l	Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ì					ļ.
CITY-ST-ZIP		DEFER	4.4 CITY-S	T-ZIP				Change	☐ Addition
TITLE		☐ DELETE	51 TITLE	J			L		
NAME OXDEST ADDRESS			5.2 NAME	ADDOCAS					\
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-S 6.1 TITLE	1-ZIP			<del></del>	Change	Addition
NAME		L. Dereit	6.2 NAME	1			_	o.m.go	
		ļ		ADDRESS		·			
STREET ADDRESS			6.3 STREET						
14. I hereby o	cortify that the information supplied with	this filing does not qualify for th	6.4 CITY-S		d in Se	ection 119.07(3)(i), Florida Statutes	I further cerl	ify that the	Information

4. 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 suppliemental 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 this 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, own an attactment with an address.

SIGNATURE:

2-24-51