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PROFIT CORPORATION ANNUAL REPORT



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

| 1996 | | | | | | | | |
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| DOCUMENT | # | | | | | | | |

K77184

(5)

| Principal Place of Business 6800 N.W. 27TH AVE. SUITE A-11 MIAMI FL 33147 BARNETT REAL ESTATE SERVICES, INC. Mailing Address 6142 MIRAMAR PKWY MIRAMAR FL 33023 US | | | | | | | | | | |
|--|---|--|---------------------|-----------------|--------------------|---|-----------------|-----------------------------|--------------------------|--|
| US | | | | | | Date incorporated or Qualified 04/03/1989 | 3a. Date | of Last F 5/01/ 1 | | |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | | | 4. FEI Number | 1 | 7 | Applied For | |
| Suite, Apt. # | # etc | 26 | | | | 65-0109166 | | | Not Applicable | |
| 22 City & State | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | • | 5 Additional Required | |
| 23 | • | City & State | | | | 6. Election Campaign Financing | | \$5.0 | 00 May Be | |
| Zip | Country | Zip | Cou | ntrv | | Trust Fund Contribution | | | ed to Fees | |
| 24 | 25 | 29 | 30 | , , | | This corporation has liability for in Florida Statutes | | . under s | 199.032, | |
| | 9. Name and Address of Curre | ent Registered Agent | | | | 10. Name and Address of New R | | gent | | |
| | | · - | | 81 | Name | | | | | |
| | TT, WILLIE | | ŀ | B2 | Street Addr | ess (P.O. Box Number is Not Acceptab | (e) | | | |
| | N.W. 48TH COURT | | Į | | | | 0, | | | |
| MAMI | FL 33055 | | | 83 | | | | | | |
| | | | Ì | 84 | City | | FL | 85 Zi | ip Code | |
| familiar with SIGNATURE _ | n, and accept the obligations of, Sec Signature, typed or printed name of registered age | tion 607.0505, Florida Statutes | | orpo | signature required | ation submits this statement for the purd d of directors. I hereby accept the appo | intment as n | egistered | d agent. I am | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFI | | DIRECTO | DRS IN 12 | |
| TITLE | DADAICTY MALLIC | ☐ DELETE | 1, 1 7(1 | TLE | | | | Change | ☐ Addition | |
| NAME | Barnett, Willie 17202 NW 48TH CT. | | 1.2 NAI | ME | | | | | | |
| STREET ADDRESS | MIAMI FL | | | | DORESS | | | | | |
| CITY-S1-ZIP TITLE | IMID-DAIL F | ☐ DELETE | 1.4 CIT | | -ZIP | | | | - | |
| NAME | | ריין מנוננונ | 2.1 TIT | | İ | | | Change | Addition | |
| STREET ADDRESS | | | 2.2 NA | | DORESS | | | | | |
| CITY-ST-ZIP | | | 24 017 | | | | | | | |
| TITLE | | ☐ DELETE | 3. 1 TIT | | <u> </u> | | | Change | Addition | |
| NAME | | | 3.2 NAN | ME | | | ب | | | |
| STREET ADDRESS | | | 3.3. STF | REETA | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 3.4 C(T) | Y-ST- | ZIP | | | | | |
| TITLE | | ☐ DELETE | 4. 1 JIT | LE | | | | Change | ☐ Addition | |
| NAME CERCET APPRICES | | | 4.2 NAN | Æ | | | | | | |
| STREET ADDRESS | | | 4.3 STR | | 1 | | | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | | 4.4 CITY-ST-ZIP | | | | | | |
| NAME | | [] Deter | 5. 1 TITI | | | | | Change | Addition | |
| STREET ADDRESS | | | 5.2 NAM 5.3 STRI | | NODECC | | | | | |
| CITY-ST-ZIP | | | 5.3 STR | | | | | | | |
| TITLE | | ☐ DELETE | 6 1 TH | | En . | | | Change | Addition | |
| NAME | | _ | 6.2 NAM | | 1 | | | Sharige | L YOURION | |
| STHEET ADDRESS | | | 6.3 STR | | DDRESS . | | | | | |
| CITY-ST-ZIP | ····· | i | 6.4 City | '- ST- | 71P | | | | | |
| I do hereby certify that the | certify that the information supplied the information indicated on this annual | with this filing is voluntarily furnis | shed and do | oes r | not muslify for | the exemption stated in Section 119.0 | 7(3)(k), Florid | a Statuti | es. I further | |

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 arrattschment with an address.

SIGNATURE:

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

Date

Date