## 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 #

(5)

BARNETT REAL ESTATE SERVICES, INC.

**FILED** May 14 1998 8:00am Secretary of State



|   |                                    |                                       | -                                       |  |  |                              |
|---|------------------------------------|---------------------------------------|---|--|--|------------------------------|
| Principal Place of Business Mailing Address   |                                    |                                       |   | * 1001011 011 1001 1001 1001 1011 0101 | ting genere mente minnt fifett inds  |                              |
| 6142 MIRAMAR PKWY 6142 MIRAMAR PKWY<br>  #C MIRAMAR FL 33023  |                                    |                                       |   |  |  |                              |
| MIRAMAR FL 33023  |                                    | US US                                 |   |  | DO NOT WRITE IN THIS SPACE   |                              |
| US  |                                    |                                       |   |  | 3. Date Incorporated or Qualified  |                              |
|   |                                    |                                       |   |  | 04/03/1989   |                              |
| 2. Principal Place of Business  |                                    | <b>├</b> ──                           | 28. Mailing Address                     |  | 4. FEI Number  | Applied For                  |
| 21  |                                    | 26                                    | _ + · · · · · · · · · · · · · · · · · · |  | 65-0109166   | Not Applicable               |
| Suite, Apt. #, etc.   |                                    | F                                     | Suite, Apt. #, etc.                     |  | 5. Certificate of Status Desired   | \$8.75 Additional            |
| City & State  |                                    |                                       | City & State                            |  |  | Fee Required                 |
| 23  |                                    | <del> </del>                          | City & State                            |  | 6. Election Campaign Financing Trust Fund Contribution                         | \$5.00 May Be                |
| Zip   | Country                            | 28  <br>                              | Count                                   | rv                                     |  | Added to Fees                |
| 24  | 25                                 | 29                                    | 30                                      | ,                                      | 8. This corporation owes or has paid the<br>Personal Property Tax due June 30. | current year intangible      |
| 9. Na   | ame and Address of Cur             |                                       |   | ······································ | 10. Name and Address of New Registers  | <del></del>                  |
| BARNETT, WILLIE 81 Name   |                                    |                                       |   |  |  |                              |
| 6142 MIR/   | amar PKWY                          |                                       | 8:                                      | Street Arin                            | dress (P.O. Box Number is Not Acceptable)                                      |                              |
| <b>#</b> C  |                                    |                                       | 6                                       | Sueet Add                              | areas (r.O. Dox Number is Not Acceptable)                                      |                              |
| MIRAMAR   | FL 33023                           |                                       | 8:                                      | 3                                      |  |                              |
|   |                                    |                                       | 8                                       | 4 City                                 |  | 85 Zip Code                  |
|   |                                    |                                       |   | 1 "                                    | F  | L                            |
| 11, Pursuant to the pro-  | ovisions of Sections 607.0         | 0502 and 607.1508, Florida            | Statutes, the abo                       | ve-named cor                           | poration submits this statement for the purpose                                | of changing its registered   |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |                                    |                                       |   |  |  |                              |
| SIGNATURE   |                                    |                                       |   |  |  |                              |
| Signature t   | yped or printed name of registered | AND DIRECTORS                         |   | gent signature requ                    | ired when reinstating) DATE  |                              |
|   | 15.7                               | DELE                                  | 13.<br>TE 1.1 YITLE                     |  | ADDITIONS/CHANGES TO OFFICERS A  | Change Addition              |
|   | NETT, WILLIE                       |                                       | 1.2 NAME                                |  |  | The The Properties           |
| 1   | MIRAMAR PKWY #C                    | 3                                     |   | T ADDRESS                              |  |                              |
|   | AMAR FL                            | ,                                     | 1.4 CITY-                               |  |  |                              |
| TITLE   | <del></del>                        | ☐ DELE                                |   | 31-211                                 |  | Change Addition              |
| NAME  |                                    |                                       | 2 2 NAME                                |  |  |                              |
| STREET ADDRESS  |                                    |                                       | 2.3 STREE                               | T ADDRESS                              |  |                              |
| CITY-ST-ZIP   |                                    |                                       | 2. 4 CITY                               | ·ST · ZIP                              |  |                              |
| TITLE   |                                    | DELE                                  |   |  |  | ☐ Change ☐ Addition          |
| NAME  |                                    |                                       | 3.2 NAME                                |  |  |                              |
| STREET ADDRESS  |                                    |                                       | 3.3 STREE                               | T ADDRESS                              |  |                              |
| CITY-ST-ZIP   |                                    |                                       | 3.4 CITY                                | ST - ZIP                               |  |                              |
| TITLE   |                                    | ☐ DELE                                | TE 4.1 TITLE                            |  |  | ☐ Change ☐ Addition          |
| NAME  |                                    |                                       | 4. 2 NAME                               |  |  |                              |
| STREET ADORESS  |                                    |                                       | 4.3 STREE                               | T ADDRESS                              |  |                              |
| CITY-ST-ZIP   |                                    | 7                                     | 4.4 CITY-                               | ST-ZIP                                 |  |                              |
| TITLE   |                                    | L_J DELE                              |   |  |  | Change Addition              |
| NAME  |                                    |                                       | 5.2 NAME                                | l l                                    |  |                              |
| STREET ADDRESS  |                                    |                                       |   | T ADDRESS                              |  |                              |
| TITLE   | <del></del>                        | □ DELE                                | 5.4 CITY-                               | ST - ZIP                               |  | Observe 171 4 2 (9)          |
| NAME  |                                    | L) Vill                               |   |  |  | ☐ Change ☐ Addition          |
|   |                                    |                                       | 6.2 NAME                                | T ADDRESS                              |  |                              |
| STREET ADDRESS  |                                    |                                       |   | T ADDRESS                              |  |                              |
| CITY-ST-ZIP  14.   hereby certify tha   | t the information supplied         | with this filing does not an          | 6.4 CITY -                              | SI-ZIP                                 | Section 119.07(3)(i), Florida Statutes, I further                              | cortifu that the information |
| indicated on this a   | nnual rebort of subbleme           | ntal annual fenort is true <b>a</b> r | id accurate and th                      | iat my signatu                         | an chall have the came lengt affect so if made                                 | under eath-that Lamen        |
| Block 12 or Block   | 13 if changed, or on an at         | ttachment inth an add <u>ress.</u>    | ed to execute this                      | report as req                          | uired by Chapter 607, Florida Statutes; and tha                                | t my name appears in         |