

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90880 028 ***158.75

DOCUMENT # K77184

1. Entity Name

BARNETT REAL ESTATE INVESTORS, INC.

Principal Place of Business

Mailing Address

6142 MIRAMAR PKWY
 #C
 MIRAMAR FL 33023
 US

6142 MIRAMAR PKWY
 MIRAMAR FL 33023-3940
 US

2. Principal Place of Business

3. Mailing Address

8910 MIRAMAR PKWY

8910 MIRAMAR PKWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE # 210

SUITE # 210

City & State

City & State

MIRAMAR, FLORIDA

MIRAMAR, FL.

Zip

Zip

Country

Country

33025

FLORIDA

33025

FLORIDA

6. Name and Address of Current Registered Agent

4. FEI Number

65-0109166

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

8910 MIRAMAR PARKWAY # 210

City

MIRAMAR

FL

Zip Code

33025

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPST** ☒ Delete
 NAME **BARNETT, WILLIE**
 STREET ADDRESS **6142 MIRAMAR PKWY #C**
 CITY-ST-ZIP **MIRAMAR FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DPST** ☐ Delete
 NAME **BARNETT, WILLIE**
 STREET ADDRESS **8910 MIRAMAR PKWY # 210**
 CITY-ST-ZIP **MIRAMAR, FL 33025**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIE BARNETT, PRES.

Date

Daytime Phone #

4/26/00

954-704-8898

CR2E034 (9/99)