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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L27816

FILED Feb 13, 1999 8:00am **Secretary of State**

02-13-1999 90003 048 ***150.00

BAR CO	n enterprises, inc.							
Principal Place	e of Business	Mailing Address		~		ald Rill A falt Aldiv atols A	1841 BIBN BIBN 144	
12894 S.W. 55	AVENUE ROAD	12894 S.W. 55 AVENUE RO	AD			•		
BELLEVIEW FL 34420 BELLEVIEW FL 34420					DO NOT WRI	TE IN THIS SPACE		
US		US			3. Date incorporated or Qualifed			
					11/02/1989	•		ŀ
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	7,
21	idos of positions	26			59-2977431		Not Applicab	le
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		,	5. Certifcate of Status Desired	1 1	5 Additional	
22		27	_		5. Certificate of Status Desired	Fe Fe	e Required	
City & Stat	e	City & State			6. Election Campaign Financing	1 1	00 May Be	
23		28			Trust Fund Contribution	Add	led to Fees	_
Zip	Country	Zip	Counti	у	8. This corporation owes the curr		· Ohe	
24	25	29	30		Personal Property Tax. 10. Name and Address of New I	Yes	□No	ᆜ
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New I	Registered Agent		\dashv
COD	DIMOLEY BADDY I		"	1 Haine	·			
	DINGLEY, BARRY J. 04 S.W. 55 AVENUE ROAD		8	2 Street	Address (P.O. Box Number is Not Accept	able) .	1 1 1 1 1 1	
	LEVIEW FL 34420		8	3	7 4	2. 6. 3.6. 100 2.4	1156 1	1
O.L.	LEVILLY I E 34420		"	1	《李拉斯》			1
			8	4 City		FI 85	Zip Code	^ \
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State o im familiar with, and accept the obligati	and 607.1508, Florida Statute of Florida. Such change was at ons of, Section 607.0505, Flor	es, the abouthorized b	ve-named y the corp s.	corporation submits this statement for the oration's board of directors. I hereby acce	purpose of changin pt the appointment a	g its registered is registered	<u>i</u>
11. Pursuant office or ragent. I a					required when reinstating)	DATE		_] 🧟
	to the provisions of Sections 607.0502 registered agent, or both, in the State of imfamiliar with, and accept the obligation of signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE				DATE FICERS AND DIRE	CTORS IN 12	<u>@</u>
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered Ag	ent signature i	required when reinstating)	DATE	CTORS IN 12	<u>@</u>
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: D DIRECTORS	Registered Ag	ent signature i	required when reinstating)	DATE FICERS AND DIRE	CTORS IN 12	
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agent OFFICERS AND P CORDINGLEY, BARRY J.	and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature i	required when reinstating)	DATE FICERS AND DIRE	CTORS IN 12	
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agent OFFICERS AND P CORDINGLEY, BARRY J.	and title if applicable. (NOTE: D DIRECTORS	Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature	required when reinstating)	DATE FICERS AND DIRE	CTORS IN 12 nge	tion (40) (41) (08)
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AND P CORDINGLEY, BARRY J. 12894 S.W. 55 AVENUE ROAD	and title if applicable. (NOTE: D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE	ent signature i	required when reinstating)	DATE FICERS AND DIRE	CTORS IN 12 nge	tion (40) (41) (08)
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14. 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 supplemental 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 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 an attachment with an address, with all other like empowered.

BARRY TICORDING LEY

54N 27 1999