

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 08:00 A
Secretary of State

DOCUMENT # L65063

1. Entity Name

BARTLEY & BARTLEY ENTERPRISES, INC.



Principal Place of Business

% ALLAN BARTLEY
9785 SW 143 ST
MIAMI, FL 33176

Mailing Address

% ALLAN BARTLEY
9785 SW 143 ST
MIAMI, FL 33176



03042008

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0185213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARTLEY, ALLAN
9785 SW 143 ST
MIAMI, FL 33176

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BARTLEY, ALLAN
STREET ADDRESS 9785 SW 143 ST
CITY-ST-ZIP MIAMI, FL

TITLE D
NAME BARTLEY, MARLENE
STREET ADDRESS 9785 SW 143 ST
CITY-ST-ZIP MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000864344
04/04/08-80011-023 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Allan Bartley **ALLAN BARTLEY** 3/5/08 305-254-7075