CORI ANNU	PROFIT PORATION AL REPORT			rine Harı ary of Stat	t is e			ary o	f State	n
DOCUN Corporation BAR-FRA		162500						90029 050 ** 		
rincipal Place BARBARA PE 190 SOUTH OC ALLANDALE FL	ters Cean drive	% 18	Mailing Address % Barbara Peters 1890 South Ocean Drive Hallandale FL 33009			•				
							3. Date Incorporated or Qua 11/13/1987			
-	ace of Business		. Mailing Address				4. FEI Number 65-0013439		↓ <u>↓</u>	Applicable
Suite, Apt. #	#, etc.	26	Suite, Apt. #, etc.			<u>_</u>	05 00 15459 Image: Control of Status Desired \$8.75 Additional 5. Certificate of Status Desired Image: Control of Status Desired Fee Required			
City & State		27	City & State				6. Election Campaign Finar	cina	\$5.00	
		28					Trust Fund Contribution		Added to	Fees
Zip	Cou	ntry 29	Zip	COL 30	intry		 This corporation owes th Personal Property Tax. 		Yes 🛛	□No
		iress of Current Regi	stered Agent		81 Nam		10. Name and Address of	New Register	red Agent	
PETE	ERS, BARBARA						ss (P.O. Box Number is Not A	ccentable)	•	
	SOUTH OCEAN				83					
	LANDALE FL 3300	э			1831				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
HALL										1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	to the provisions of S	ections 607.0502 and	607 1508, Florida Stal	tutes, the a	84 City	d corpo	pration submits this statement (or the purpose accept the at	B5 Zip C Carlos Construction E of changing its popointment as reg	registered
1. Pursuant 1 office or re agent. I at	egistered agent, or b m familiar with, and a	oth, in the State of Flor accept the obligations of name of registered agent and title	e if applicable. (NC	Torida Stat	84 City above-name d by the con tutes.	porudoi	when reinstating)	DATE	e of changing its ppointment as reg	registered jistered
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