## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M75369

THE BARDELL COMPANY

Principal Place of Business

(2

Mailing Address

## 

**FILED** 

Apr 16 1997 8:00am

Secretary of State

206 MARTIN ST INDIAN HARBOR BCH FL 32937 US			206 MARTIN ST INDIAN HARBOR BCH FL 32937-2731 US										
									3. Date Incorporated or Qualified 04/05/1988		te of Las 3/1996		
2. Principal Place of Business		n	2a. Mailing Address					4. FEI Nuniber	PAGE				
21 Cuito Ant # oto				Suite, Apl. #, etc.					65-0085325   Not Applicabl				
Suite, Apt. #, etc.			27						5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			28						Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Z(p 24		Country 25	7ip 29	30					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
DAD		and Address of Curre	ent Hogistered	Agent		81	Nam		10. Name and Address of New Re	gistered /	Agent		
	DELL, DORE Martin Sti												
INDIAN HARBOUR BEACH FL 32937					82 83	Stree	t Addres	ss (P.O. Box Number is Not Acceptab	ele) 				
						84	City				Ter   7	ip Code	
										FL		·	
11, Pursuant office or i	to the provision registered age	ons of Sections 607.05 ont, or both, in the Sta	502 and 607.15 to of Florida, Si	08, Florida Statu ich change was	ites, the a authorize	bove d by	e-name / the co	id corpoi orporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of of the app	changin pintment	g its registered as registered	
i	ım familiar wil	h, and accept the obli	gations of, Sec	tion 607.0505, f	Iorida Sta	tutes	8.						
SIGNATURE	Signature, typed	or printed name of registered a	god and title if apple	cable (NO	ITE: Registore	d Agr	not signati	are required	when reinstating)	DATE			
12.		OFFICERS A	ND DIRECTOR	The second secon	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	DADOCU	DODECH		L] DELETE	1.1 1			1			Chang	e 🔲 Addition 🖟	
NAME	BARDELL,				1.2 N							ĺ	
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NAME	i				5.2 N	AME							
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NAME					6.2 N/							1	
STREET ADDRESS	S					63 STREET ADDRESS							
CITY-ST-ZIP					6.4 CI	IY-S	1-ZIP	.] .					

I do hereby certify that the information supplied with this filing closs 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 cath, that I am an officer or director of the corporation or the receiver or trustee emowered 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.

407-727-7400