

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001639

FILED
Apr 27, 2007
Secretary of State

Entity Name: THE IRON BARR GROUP, INC.

Current Principal Place of Business:

15930 NW 17TH PLACE
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

15930 NW 17TH PLACE
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 65-1018391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARR, JUDY
15930 NW 17TH PLACE.
OPA-LOCKA, FL 33054 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARR, JUDY
Address: 15930 NW 17TH PLACE
City-St-Zip: OPA-LOCKA, FL 33054

Title: D () Delete
Name: GOSIER, KEMBA
Address: 18015 NW 17TH AVENUE
City-St-Zip: OPA LOCKA, FL 33056

Title: D () Delete
Name: THOMAS, CHARLES
Address: 16321 NW 18TH PLACE
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY BARR

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date