

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2005 08:00 AM
Secretary of State

DOCUMENT# P00000038577 1. Entity Name MR BARRY, INC.	
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Principal Place of Business 2909 WEST STATE ROAD 434 #121-131 LONGWOOD, FL 32779	Mailing Address 2909 WEST STATE ROAD 434 #121-131 LONGWOOD, FL 32779
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DO NOT WRITE IN THIS SPACE



01312005 NoChg-P CR2E034(10/03)

4. FEIN Number 59-3639247	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODMAN, BARRY S
2909 W. STATE ROAD 434
SUITE 121-131
LONGWOOD, FL 32779

**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.

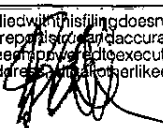
SIGNATURE _____
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent's signature required when re-instating) _____ **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	1000000284585 04/02/05-80011-009 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDST GOODMAN, BARRY S 2909 WEST STATE ROAD 434 #121-131 LONGWOOD, FL 32779
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied in 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 report or supplemental report is true, accurate and that my signature shall have the same legal effect as if made under oath, that a man 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 of a similar nature like empowered.

SIGNATURE:  **Barry S. Goodman** **3/18/05** **407-786-4244**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone#