

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90050 041 ***150.00

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DOCUMENT # P02000001701

1. Entity Name
BARMER, INC.



Principal Place of Business
**550 N BIRCH RD
FT LAUDERDALE FL 33304**

Mailing Address
**550 N BIRCH RD
FT LAUDERDALE FL 33304**

2. Principal Place of Business
552 N. Birch Road
Suite, Apt. #, etc.

3. Mailing Address
552 N. Birch Road
Suite, Apt. #, etc.

City & State
Ft. Lauderdale
Zip
33304
Country
USA

City & State
Ft. Lauderdale
Zip
33304
Country
USA

4. FEI Number
03-0375882

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**KOSKEY, RICHARD C ESQ.
310 S UNIVERSITY DR
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MERCADO, GARY S**
STREET ADDRESS **7860 LULU GLEN DR**
CITY-ST-ZIP **LOS ANGELES CA 90046**

TITLE **D** ☐ Delete
NAME **BARNES, STEVEN C**
STREET ADDRESS **7860 LULU GLEN DR**
CITY-ST-ZIP **LOS ANGELES CA 90046**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **552 N. BIRCH ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **552 N. BIRCH ROAD**
CITY-ST-ZIP **FT. LAUDERDALE FL 33304**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with 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 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 **GARY MERCADO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/03

Date

954-564-3151

Daytime Phone #

CR2E034 10/02