


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000086657		
1. Entity Name BAR 7202, INC.		
Principal Place of Business 6105 MEMORIAL HWY SUITE G TAMPA, FL 33615 US	Mailing Address 6105 MEMORIAL HWY SUITE G TAMPA, FL 33615 US	



DO NOT WRITE IN THIS SPACE

03102005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0190303	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MAESTRELLI, RICHARD B
6105 MEMORIAL HWY
SUITE G
TAMPA, FL 33615

**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 _____ (NOTE: Registered Agent signature required when reinstating) 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**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAESTRELLI, RICHARD B 6105-G MEMORIAL HWY. TAMPA, FL 33615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIESS, ROBERT M 2602 W. SAM ALLEN RD. PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELICKE, ALBERT H 18508 CRAWLEY RD. ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 information.

SIGNATURE:

Richard B Maestrelli Richard B Maestrelli 3/10/05 (813) 882-9000