2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 29, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # P0300010 OTIN' IT, INC.	9802					•	_	***150.00	
Principal Plac	e of Business	Mailing Address							~ ¥ U II	1685
1580 RIDGE LONGWOOD.		1580 RIDGE AVE Longwood, FL 32750							• •	2000
LONGWOOD,	FL 32730	LUNGWOOD, FL 32/30	•	ļ						
2 Principal P	lace of Business	3. Mailing Address								
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Suite, Apt. #, etc.		Suite, Apt. #, etc.			01122004	Ch	ıg-P	CR2E	34 (10/03)	
City & State		City & State			4. FEI Numb	- ا	3104	。 2 1 1 8	<u> </u>	pplied For
Zip	Country	Zip	Country		E Cortificate			\ <u>\</u>	\$8.75 Add	ot Applicable litional
					5. Certificate			X	Fee Require	
<u> </u>	6. Name and Address of Curren	t Registered Agent	Name	V:	7. Name and	Addres			Agent	
	PH, KIMBERLY	en Madical Appropriations			P.O. Box Numb	<u>// . </u>	ARE			-
1580 RIDO	GE AVE OD, FL 32750		Sireet At	uaress (i	28C		Acceptable	<u>"ρυ</u>	<u> </u>	
20110110	00,12 02.00)			
			City 1	000	1000	1		FL	Zip Cod	รู้ ว ราว
	named entity submits this statement	for the purpose of changing its	registered office or	register	ed agent, or bo	th, in the	State of Flo	rida. Lam	familiar with,	and accept
the obligat	tions of registered agent	- 1. 1	0	_				, ,	au 6.	<i>(</i>)
SIGNATURE.	Signature, typed or printed name of registered age	nt and title if application (NOTE	: Registered Agent signatu	re required	when reinstating)			DATE	24-0	<u>-</u>
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550		ibution.		00 May Be ed to Fees				ula -	
10.	OFFICERS AN		11.						DIRECTOR	
TITLE NAME	F RANDOLPH, KIMBERLY	☐ Delete	TITLE NAME	Kin	abenly	A.	AREA	ia	Change	Addition
STREET ADDRESS	1580 RIDGE AVE		STREET ADDRESS	,						
CITY-ST-ZIP	LONGWOOD, FL 32750		CITY-ST-ZIP	-						
TITLE NAME	LOUREE, DAVID	☐ Delete	TITLE NAME						Change	☐ Addition
STREET ADDRESS	1580 RIDGE AVE		STREET ADDRESS							
CITY-ST-ZIP	LONGWOOD, FL 32750		CITY-ST-ZIP							
TITLE NAME		☐ Delete	TITLE NAME						☐ Change	Addition A
STREET ADDRESS.			STREET ADDRESS	- .	,;				_ ~	
CITY-ST-ZIP			CITY-ST-ZIP							
TITLE NAME		☐ Delete	TITLE NAME						Change	☐ Addition
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							
TITLE	}	☐ Delete	TITLE						☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							
TITLE		☐ Delete	TITLE						Change	Addition
NAME	i			l .						
	1		NAME	} '						
STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP							

receive up and the minimation supplied with this limit goes not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. Fitting 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Affachment

Annual Report Filing Instructions

January 12, 2004

P03000109802

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	0 700
Prepared for	Kim Arena Barefootin' It, Inc. 1580 Ridge Ave Longwood, FL 32750
Prepared by	Rogers, Scruggs & Hoskins, C.P.A., P.A. 209 North Goldenrod Road Orlando, FL 32807
To be signed and dated by	An officer or director of the corporation on line 11 with date and daytime phone number. In addition, on line 8, the Registered Agent of the corporation must also sign.
Amount to send with annual report	\$ 150.00
Mail tax return to	Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500
Return must be mailed on or before	Please do As Soon As Possible. Due date is May 1, 2004 without penalty.
Special instructions	This return is required to continue your corporation or other business entity in this state. The UBR is a basic form requiring information such as officer names and addresses and an officer signature and check. The fee is normally \$150 for timely filed corporations and increases to \$550 after May 1, 2004. Do not forget to file this required form. Failure to file this form will result in corporate dissolution. If you need any assistance, please call us. Please verify all information and file this form with the state immediately.
	form with the state immediately.