2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 8:00 am Secretary of State 04-16-2007 90093 039 ***150.00

DOCUMENT # P06000102441 1. Entity Name BARRY OLFERN AND ASSOCIATES INC.						04-16-2007	90093 039 ***1	50.00
Principal Plac	e of Business	Mailing Address						
954 TYLER ST. 954 TYLER ST. HOLLYWOOD, FL 33019 HOLLYWOOD, FL 33019			119					
						HIA ANN ARN ARN AR	AL HER HERE (1881 ESER ESER) I	(D)
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04112007	Chg-P	CR2E034 (12/06)	
City & State		City & State		4. FEI Number	-434019	53	applied For lot Applicable	
Zip	Country	Zip	Count	try		Status Desired	S8.75 Ac	
	6. Name and Address of Current	Registered Agent	١		7. Name and A	ddress of New R	Registered Agent	
				Name				
OLFERN, BARRY 954 TYLER ST.				Street Address (P.O. Box Number is Not Acceptable)				
HOLLYWOOD, FL 33019				L				
				City			FL Zip Co	de
The above named entity submits this statement for the purpose of changing its registers				L ed affice or regis	stered agent, or both	in the State of Flo		n, and accept
the obligation	tions of registered agent.							
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. {NO	TE: Registered	d Agent signature requ	bired when reinstating)		DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fir Trust Fund Contribution				· , •	55.00 May Be added to Fees			
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS /C	HANGES TO OFF	ICEBS AND DIRECTO	
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indicated on this report or supplied with rish siling does not quality for the eventploins contained in Chapter 119, Horida Statutes. I further certify that the indicated on this report or supplied with rish and accurate and that my signature shall have the same legal effect as if made under calt; 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:

BONG J CLIE BARRY J. OLFREND

BIGHATURE AND PUPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR