2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2008
Secretary of State

DOCUMENT# P07000094624

Entity Name: BARBARKALL INC.

Current Principal Place of Business:

5261 BRIGHTON SHORE DR.
APOLLO BEACH, FL 33572 US

New Principal Place of Business:

4624 N GRADY AVE
TAMPA, FL 33614 US

Current Mailing Address:

5261 BRIGHTON SHORE DR.
APOLLO BEACH, FL 33572 US

New Mailing Address:

FEI Number: 26-0785792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

CARDIN, BARBARA G PRESIDE
5261 BRIGHTON SHORE DR
APOLLO BEACH, FL 33572 US

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.

SIGNATURE: BARBARA CARDIN 07/18/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: CARDIN, BARBARA
Address: 5261 BRIGHTON SHORE DR.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: TRES ( ) Delete
Name: CARDIN, BARBARA
Address: 5261 BRIGHTON SHORE DR.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: SECT ( ) Delete
Name: CARDIN, BARBARA
Address: 5261 BRIGHTON SHORE DR.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: DIR ( ) Delete
Name: CARDIN, BARBARA
Address: 5261 BRIGHTON SHORE DR.
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA CARDIN PRES 07/18/2008
Electronic Signature of Signing Officer or Director Date