

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000094624

**FILED**  
**Oct 04, 2011**  
**Secretary of State**

**Entity Name:** BARBARKALL INC.

**Current Principal Place of Business:**

4624 N GRADY AVE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**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:**

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

**Name and Address of New Registered Agent:**

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

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby 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 all other like empowered.

**SIGNATURE:** BARBARA CARDIN

PRES

10/04/2011

Electronic Signature of Signing Officer or Director

Date