

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P18904

1. Entity Name

BARROW INDUSTRIES INC.

FILED
Feb 27, 2000 8:00 am
Secretary of State

02-27-2000 90077 008 ***150.00

Principal Place of Business

Mailing Address

3 EDGEWATER DR
NORWOOD MA 02062
US

3 EDGEWATER DRIVE
NORWOOD MA 02062-4642
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-2225826

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ NYDIA
8260 NW 27TH ST
104
MIAMI FL 33122

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME BARROW, STEPHEN Y.
STREET ADDRESS 783 NEWTON STREET
CITY-ST-ZIP BROOKLINE MA ☐ Delete

TITLE
NAME Jeffrey L Barrow
STREET ADDRESS 133 Dartmouth St
CITY-ST-ZIP W. Newton MA 02465 ☐ Change ☒ Addition

TITLE SD
NAME ARNOLD, ROBERT E.
STREET ADDRESS 46 WHITEWALL ST.
CITY-ST-ZIP QUINCY MA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME HARPER, DANIEL
STREET ADDRESS 164 CLAYBROOK RD.
CITY-ST-ZIP DOVER MA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME HUNTER, DONALD
STREET ADDRESS 183 CARROLL AVE.
CITY-ST-ZIP BROCKTON MA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert E. Arnold
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/00
Date

981 440 2666
Daytime Phone #

CR2E034 (9/99)