## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300004039

MICHAEL R. BARNES, P.A.

Principal Place of Business	,
513 WHITEHEAD STREET	
KEY WEST FL 33040	

FILED May 04, 1999 8:00 am Secretary of State 05-04-1999 90064 029 \*\*\*150.00

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24	25	29	30			Personal Property Tax.		∐ Yes	□No
	9. Name and Address of Curr	rent Registered Agent			10. N	lame and Address of New	Registered A	gent	
••				81 Name					
BARI	NES, MICHAEL R.								
	WHITEHEAD STREET			82 Street	Address (P.C	D. Box Number is Not Accept	ptable L	المده	ì
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11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	)502 and 607,1508, Florida	Statutes, the a	ibove-named o	corporation s reation's hos	rd of directors. I hereby acc	ent the appoint	tment as	registered
agent. I a	m familiar with, and accept the obli	igations of, Section 607.05	5, Florida Stat	utes.	3.4		,		
3		-							
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SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable.	(NOTE: Registered	l Agent signature re	squired when rein	estating)	DATE		
	Signature, typed or printed name of registered a			l Agent signature re				DIRECT	ORS IN 12
12.	OFFICERS A	AND DIRECTORS	13.			estating) DDITIONS/CHANGES TO C			
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental angual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 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