FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



FLORIDA DEPARTMENT OF STATE am RATIONS

| CORPORATION ANNUAL REPORT 1996 | Sandra B. Secretary DIVISION OF CO | |
|--------------------------------------|------------------------------------|----------------|
| DOCUMENT # | P9300001 | 5781 (6) |
| BARTOW HOLDING | CO., INC. | |
| Principal Place of Business | Mailin | g Address |
| 1910 STATE RD 60- WEST | 325 | 4 W. MOHAWK LN |

| DANIC | W HOLDING CO., INC. | | | | |
|-------------------------------|---|--|--|--|---|
| Principal Place | of Business | Mailing Address | | | ### 88101 11901 011#1 1868# 16101 1191 1091 |
| 1910 STATE BARTOW FL US | RD 60- WEST 33830 | 3254 W. MOHAWK LN PHOENIX AZ 85027030 US | \triangleright | | |
| | | | | 03/02/1993 | Date of Last Report 05/22/1995 |
| 2. Principal Pla 21 | ice of Business | 2a. Mailing Address | | 4. FEI Number 65-0400620 | Applied For Not Applicable |
| Suite, Apt. # | , etc. | Suite, Apt. #, etc. | | | \$8.75 Additional |
| 22 City & State | | City & State | _/ | 6. Election Campaign Financino | Fee Required \$5.00 May Be |
| 23 | | 28 | _ | | Added to Fees |
| Zip | Country | Zip | Country | This corporation has liability for inta Florida Statutes | - |
| 24 | 25 9. Name and Address of Currel | 29 85027 6030 nt Registered Agent | 30 | 10. Name and Address of New Regi | |
| | <u> </u> | | 81 Name | hita | |
| KNESKI | , PETER/KNESKI & KNESK | 1 | 82 Street Addr | ress (P.O. Box Number is Not Acceptable) | |
| BISCAY | NE BUILDING - SUITE 807 | | | , | |
| 19 W FI | LAGLER ST. | | 83 | | |
| MIAMI F | L 33130 | | 84 City | | FL 85 Zip Code |
| 11. Pursuant to | o the provisions of Sections 607.050 | 2 and 607 1508. Florida Statutes | s. the above-named coroor | ration submits this statement for the purpor | e of changing its registered office |
| or registere | ed agent, or both, in the State of Flori h, and accept the obligations of, Sec | ida. Such change was authorize | d by the corporation's boa | rd of directors. I hereby accept the appoint | ment as registered agent. I am |
| SIGNATURE | | • | | | |
| | Signature, typed or printed name of registered agen | | E Registered Agent signature require 13. | d wher reinstaling) ADDITIONS/CHANGES TO OFFICE | DATE OR AND DIDECTORS IN 12 |
| 12. | PD OFFICERS AN | ID DIRECTORS DELETE | 1. 1 TITLE | ADDITIONS/CHANGES TO OFFICE | Change Addition |
| NAME | LANDSMAN, SAMUEL | | 1.2 NAME | | C) charge C (market |
| SIREET ADDRESS | 18071 BISCAYNE BLVD #16 | 601-N3 | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | N MIAMI BEACH FL 33160 | | 1.4 CITY - ST - ZIP | | |
| TITLE | SD | DELETE | 2 1 TITLE | | Change Addition |
| NAME | LANDSMAN, RHODA | | 2 2 NAME | | |
| STREET ADDRESS | 18071 BISCAYNE BLVD #16 | 601-N3 | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | N MIAMI BEACH FL 33160 | | 2 4 CITY - ST - ZIP | | |
| TITLE | TD | DELETE | 3. 1 TITLE | | Change Add-tion |
| NAME | VANICEK, R. D. | | 3 2 NAME | | |
| STREET ADDRESS | 3254 W MOHAWK LN PHOENIX AZ | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | PHUENIA AZ | □ DELETE | 3.4 C(TY - ST - Z(P) | | Change Addition |
| NAME | | | 4.2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4 4 CHTY - ST - ZIP | | |
| TITLE | | ☐ DELE1E | 5. 1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY - \$1 - 2IP | | | 5.4 CITY-ST-ZIP | | |
| TOLE | | ☐ DELÉTE | 6. 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6 2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | v certify that the information supplied | with this filing is voluntarily furnis | 640TY-ST-ZP | for the exemption stated in Section 119.07 | (3)(k), Florida Statutes. I further |

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of this corporation or the rection or 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 or an extachment with an address.

SIGNATURE: _

R. D. VAN R. D. VANICEK 4/12/96

602 780-4963