

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0084733

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000088294**

1. Corporation Name

BARBARA'S BEAUTIFUL HOMES, INC.

Principal Place of Business
**1702 WALDEN VILLAGE COURT
PLANT CITY FL 33567**

Mailing Address
**1702 WALDEN VILLAGE COURT
PLANT CITY FL 33567**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/13/1993

4. FEI Number

59-3221401

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

21 1702 WALDEN VILLAGE COURT

Suite, Apt. #, etc.

22 City & State

23 PLANT CITY, FLA

24 Zip **33567** 25 Country **U.S.A.**

2a. Mailing Address

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**WOOD, BARBARA
1702 WALDEN VILLAGE COURT
PLANT CITY FL 33567**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **WOOD, BARBARA**
STREET ADDRESS **1702 WALDEN VILLAGE COURT**
CITY-ST-ZIP **PLANT CITY FL 33567**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

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TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME **700002967657-7**

1.3 STREET ADDRESS **-08/24/99--01010--010**

1.4 CITY-ST-ZIP ******150.00 ****150.00**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Barbara Wood**

7-21-99 813-752-6000

CR2E034 (5/99)

August 5, 1999

**Sean Toner
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314**

Dear Mr. Toner:

This letter is in follow up of my recent conversation with your office. Your name was given to me as the contact person to advise you that this is the "FIRST NOTICE" that I have received with regard to my Corporate Filing Fee. Accordingly, I have enclosed my check for \$150.00.

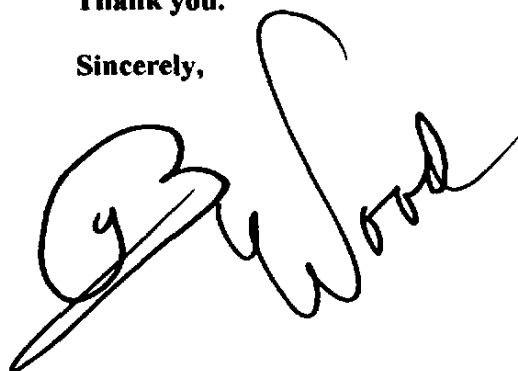
If you have any questions I may be reached as follows:

**Barbara Wood
RE/MAX REALTY EXCELS
1702 Walden Village Court
Plant City, Florida 33567**

TELEPHONE: 813-752-6000

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'B Wood', with a large, stylized 'B' and a long, sweeping underline.