## 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 #  1. Corporation Name BARTEC, INC.	P94000010981
	•
	·
Principal Place of Business	Mailing Address

## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90124 013 \*\*\*150.00



Principal Place of Business	Mailing Address				
5151 N.W. 45TH TERRACE COCONUT CREEK FL 33073	5151 N.W. 45TH TERRACE COCONUT CREEK FL 33073		DO NOT WRITE IN THIS	SPACE	
			3. Date Incorporated or Qualifed 02/04/1994		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		<u>65-0467363</u>	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 25	Zip Cot	untry	This corporation owes the current year Int Personal Property Tax.	angible ∐Yes LiNo	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
BARCALA, SERGIO		81 Name			
5151 N.W. 45TH TERRACE		82 Street Address (P.O. Box Number is Not Acceptable)			
COCONUT CREEK FL 33073		83			
		84 City	FL	85 Zip Code	
<ol> <li>Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State or agent. I am familiar with, and accept the obligation</li> </ol>	f Florida. Such change was authorize	d by the corporation	ration submits this statement for the purpose of 's board of directors. I hereby accept the appoi	changing its registered ntment as registered	
SIGNATURE		4.5	DATE		

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: F	Registered Agent signature required wh	en reinstation)	ATE	
40	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		PS IN 12
12.	El per cre	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	<u> </u>	1		enunge	
NAME	BARCALA, SERGIO	1.2 NAME			
STREET ADDRESS	5151 N.W. 45TH TERRACE	1.3 STREET ADDRESS			,
CITY-ST-ZIP	COCONUT CREEK FL 33073	1.4 CITY-ST-ZIP			
TITLE	☐ DELETE	2.1 TITLE		Change	Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP	•	2.4 CITY-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME		3.2 NAME			
STREET ADORESS	:	3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME	•	4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	DELETE	5.1 TITLE		Change	☐ Addition
NAME	*	5.2 NAME			
STREET ADDRESS	•	5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADORESS	•	6.3 STREET ADDRESS			
CITY-ST-ZIP	Park Copyride Copy	6.4 CITY-ST-ZIP	ion 440 07/2)/() Elegide Statutes   furt		

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 cath; 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, with all other like empowered.