## 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 # **P94000055784**

BACK HOME IMPORTS, INC.

Principal Plac	ce of Business	Mailing Address					F 10031003 310 10	III BIDEI OOKII <b>10</b>	iis <b>Ba</b> isi <b>Ob</b> ib	I BRIGI BIRIL IVBI	
5717 MAIN STRÈET NEW ORT RICHEY FL 34652		5717 MAIN STREET NEW PORT RICHE									
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		•				3.	. Date Incorporated	l or Qualifed			
							07/27/1994			¥ · · · · · · · ·	
<b>└</b>	Place of Business	2a. Mailing Addres	SS			4.	FEI Number			<del></del>	pplied For
Suite, Apt.	# etc	26 Suite, Apt. #, 6	etc				<u>59-3255525</u>				ot Applicable
22	. 11) 0.07	27	010.			5.	Certifcate of Statu	s Desired			Additional equired
City & Sta	ite	City & State	***************************************			6.	Election Campaig	n Financing			May Be
23		28					Trust Fund Contri	-			to Fees
Zip	Country	Zip		ıntry		8.	This corporation of	wes the curre	ent year Int	tangible	
24	25	29	30				Personal Property			X Yes	□No
	9. Name and Address of Curi	rent Registered Agent		81	Name		Name and Addre	ss of New R	egistered	Agent	
στ	LEY, ROBERT	and a by the new his a few miles		"	Name						
BAC 861	9 NEW YORK AVE			82	Street	Address (F	P.O. Box Number is	Not Accepta	ble)		
HUE	DSON FL 34667			83			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in the same of	Transfer	1, 2 3 11 12 2 3	1 (# 1. 1/6, . 1y)
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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 ap attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 

Jan 30, 1999 8:00am

**Secretary of State** 

01-30-1999 90001 031 \*\*\*150.00