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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

P94000081560 (2)

DOCUMENT #

1. Corporation Name

ALYBAR, INC.



Principal Place of Business Mailing Address								. 18191 11891 9111	• • • • • • • • • • • • • • • • • • • •
8183 N.W. BT PLANTATION		8183 N.W. 8TH MANG PLANTATION FL 3333							
						3. Date Incorporated or Qualified 11/07/1994	<b>3a</b> . D	ate of Last Re 08/08/19	
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For		
21		26	6						Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc	-n			5. Certificate of Status Desired			Additional
22		27				— Fee Hequired			
City & State		City & State	¬ ·			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
<b>23</b> Zip	Country	28 Zip	Coun	tru.		This corporation has liability for in	ntanoible		
24	25	29)	30	ti y		Florida Statutes Yes		: tax under s	199.002
[4]	g Name and Address of Curren	L. <u></u>	1901			10. Name and Address of New R		d Agent	
	J			31	Name				
YESSMA	n, allen		ļ.	32	Ct t A el el	ress (P.O. Box Number is Not Acceptable	0)		
	W. 8TH MANOR		1'	32	Street Acid	Treet Address (F.O. Box Norther to Not Acceptable)			
PLANTA"	TION FL 33324		Ī	83					
			ļ.	34	Ctu			les Zi	p Code
				34	City		F	85 Zij	p Code
12.	Signature, typed or printed have of regetered as in OFFICERS AND	D DIRECTORS	13.		sgranic regard	Twier recisions  ADDITIONS/CHANGES TO OFFI	DATE CERS A	NO DIRECTO	A . M P. MARIE
TITLE	D	DELETE	1 <b>1</b> TIT	TLF				☐ Change	Add tion
NAME	YESSMAN, ALLEN		1 2 NA!	ΛĹ					
STREET AUDRESS	8183 N.W. 8TH MANOR		1.3 \$16	EETA	ADDRESS				
City - S* - ZiP	PLANTATION FL 33324		1.4 C-1		- 71F				4.000000
TITLE		☐ DEFEIE		2 1 11116		DIRECTOR		Change	Addition
NAME			2.2 NAI			BARBALA YEII MAN	1		
STREET ADDRESS					ADDRESS	DIRECTOR BARBAKA YEISMAN BIBBNIU 8TH MANDA PLANTATION FC 3332	. 1		
CITY - ST - ZIP		DELETE	24 CIT 3 1 TII		21-1	PCHN 14 1/0~ 1 ( 333E)	Ч	Change	Addition
TITLE NAME		Приси	3 2 NA					L	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3 4 011						
TITLE		☐ DELETE	4 1 (1)					Change	Addition
NAME			4.2 NA	ΜĒ					
STREET ADDRESS			4351	REET A	ADDRESS				
CITY-ST-ZIP			4.4 CrT	Y - ST	- <b>Z</b> ıP				
TITLE		☐ DELETE	5 1 Til	LE				Change	Addition
NAME			5.2 NA						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP			5.4 Ct1		-ZIP				
TITLE		DELETE	6 1 Ti					☐ Change	☐ Addition
NAME			G.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	Leadily that the information annual of	with this files is volunteed for	6 4 Cil			for the exemption stated in Section 119	07/31/61	Florida Statu	itas I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplementa' 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: (

Oll - HONSON OF SIGNING OFFICER OR DIRECTOR

4/17/96 854 473 9209

R2E034 (12/95)