FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400083280 (5)

BARA VINELAND, INC.

Principal Place of Business 5401 S. KIRKMAN ROAD SUITE 725 ORLANDO FL 32819		Mailing Address 5401 S. KIRKMAN ROAD SUITE 725 ORLANDO FL 32819-7912			i (681/68) He (561) 913H, 281H 284H 281H 281H 2015 1010 1110 1110 1110 1110 1110				
					3. Date Incorporated or Qualified	lified 3a. Date of Last Report 04/10/1996			
2. Principal Flace of Business 2a. Mailing Address						11/14/1994 4. FEI Number	1 <u>V9/</u>		pplied For
21		26				59-3280754			ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional			
22		27						equired	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Ζφ [[]]	├─ŋ ``			Country		8. This corporation has tiability for intangible tax under s. 199.032, Florida Statutes Yes No			
24 25 29 39 Name and Address of Current Registered Agent			101	10. Name and Address of New Registered Agent					
VUA*			В	1	Name				
KHATIB, RASHID A 5401 S. KIRKMAN ROAD			L A	62 Street Address (P.O. Box Number is Not Acceptable)					
	E 725		[otroot Addre	OUTTOGRIDGE (F.O. DON TRUTTOO) IS THE TOO OPTIONS			
	ANDO FL 32819		8	3					
0110	WIDO I E GEOIG		8	4	City			85 Zip	Code
				1			FL	•	
office or n	egistered agent or both, in the State m familiar with, and accept the oblig	of Florida, Such change was au	ithorized I	bv i	the corporation	oration submits this statement for the p on's board of directors. I hereby accep	t the app	pointment as	registered
	Signature, typed or pented name of registered ag-			gen	it signature require	ed when reinstating)	DATE	DIDECTO	DO IN 10
12.		D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS ANI	Change	Addition
T 1LE NAME	<i></i>		1.2 NAME						
NAME KHATIB, RASHID A SHEELADORESS 5401 S. KIRKMAN RD., SUITE 725			1.3 STREET ADDRESS		ADDRESS		•		
CHY-ST-74	ORLANDO FL 32819	725	1.4 City						
HILF	D DELETE			2.1 TITLE				Change	☐ Addition
NAME:	MAALI, JESSE I		2.2 NAM	3					i
STREET ADDRESS	6454 INTERNATIONAL DRIVE		23 STRE	2.3 STREET ADDRESS					•
CI*Y+S1-7IP	ORLANDO FL 32819		2 4 City	_	T-ZIP				
THLE	DELETE		31 TITLE			. 1		Change	Addition
NAME :			3.2 NAM						
STHEET ADDRESS					ADDRESS				
CICY-SI-ZIP TITUE	☐ DELETE			3.4. City-St-ZiP 4.1 title				Change	Addition
NAME			4. 2 NAN	Æ	1				
STREET ADDRESS			4.3 STRE	ET A	ADORESS				
COY-S1-ZIP			4.4 CITY	-ST	1- 2 IP				
TITLE	DELETE			5.1 TITLE				Change	Addition
NAME			5.2 NAM	E					•
STREET ADDRESS			5.3 STRE	13	ADDRESS				
CITY - S1 - 7IP		☐ DELETE	5.4 CITY		i-ZiP			☐ Change	Addition
THUE		C) DECEIE	6.1 TITLI 6.2 NAM		ļ			C. Crignige	L., Addition
NAME province					ADDRESS				
STREET ADDRESS			6.4 CiTY		1				
0/11-5"-7# 14. I do here!	L by certify that the information supplie	ed with this filing does not qualify	for the e	xar	mption stated	In Section 119.07(3)(i), Florida Statute	s. I furthe	or certify that	t the
informatic	as indicated on this annual report or	supplemental annual report is tru r the receiver or trustee empowe	ue and ac ared to ex	ነር ነገ	irate and that	my signature shall have the same legat t as required by Chapter 607, Florida \$	i eneci s	is it made ur	nder bath: inat

CICNATURE

CHATURE AND TYPED OR PRINTED NAME OF SHOTHING OFFICER OR DIRECTOR DAY OF THE DAY OF THE PROPERTY OF THE PROPER