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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000090881 (1)

BARCHAR SALES, INC.

## FILED May 04 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address				ı toditodi teh tibeli didir antıl albili dölik ablılı abılı a	#101 10101 10101   101 10E;
777 N.W. 72N STE 2AA48 MIAMI FL 331 US		777 N.W. 72ND AV STE 2AA48 Miami FL 33126 US	<b>/E</b> .			DO NOT WRITE IN THIS SP 3. Date Incorporated or Qualified 12/15/1994	ACE
	tace of Business	2a, Mailing Addres	iS			4. FEI Number	Applied For
21		26				65-0565368	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	ic.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	6	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count			8. This corporation owes or has paid the curre	
24	25	29	30				Yes 🔲 No
g, Name and Address of Current Registered Agent				81	Name	10. Name and Address of New Registered Ag	jent
STI MI/	7 N.W. 72ND AVE. E 2AA48 AMI FL 33126		0	82 83 84	City	FL	85 Zip Code
office or r	to the provisions of Sections 607.6 re <b>giste</b> red agent, or both, in the St im <b>fa</b> miliar with, and accept the ob-	ate of Florida. Such change	e was author	rized by	the corpora	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoi	nanging its registered
SIGNATURE	Signature typed or proted name of required		AVOITE B			ired when reinstating) DATE	
12.		AND DIRECTORS		13.	nt signature requ	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12
TITLE	<b>DPVS</b>	DELE	~	I.1 TITLE			Change Addition
NAME	SILBERMAN, BARBARA		1	I.2 NAME			
STREET ADDRESS	777 N.W. 72ND AVE.		1	I.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33126		,	1.4 CITY-S	r- 7IP		
TITLE	Ť	DELE	TE 2	21 TITLE			Change Addition
NAME	SILBERMAN, BARBARA		] 2	2 2 NAME	J		}
STREET ADDRESS	777 N.W. 72ND AVE.		2	2.3 STREET	ADDRESS		1
CITY-ST-ZIP	MIAMI FL 33126		2	2. 4 CITY - S	T-ZIP		
TITLE		DELE	TE 3	3.1 TITLE			Change Addition
NAME			3	3.2 NAME	ļ		,
STREET ADDRESS			9	3.3 STREET	ADDRESS		

14. Thereby 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 turb tree 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 attact prient with an address.

3.4. CITY - ST - ZIP

4 3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

4 4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

DELETE

CICALATUDE.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

4/24/98

305 261 2805

☐ Change

Change

Change

Addition

Addition

Addition