PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000078345**1: Corporation Name

BAILEY, JOHNSON AND ASSOCIATES, INC.

Principal Pla	ce of Business	Mailing Address		i inntinut tin tâtêt êtiti ûktit êsiti êsiti êsiti ês	(890) (9100 HILL G188) 9HI 1981
1016 NW 531	RD STREET	10116 NW 53RD STREET			,
SUNRISE FL 33351 SUNRISE FL 33351					*
12.5	•			DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualifed	
H. I				10/12/1995	•
21 Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0623743	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	,	7, 10 14	\$8.75 Additional
22		27		5. Certifcate of Status Desired.	Fee Required
i City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	
24	25	29	30	Personal Property Tax.	XYes □No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registere	
81 Name					•
JOI	inson, roger			***************************************	
101	16 NW 53RD STREET		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SU	NRISE FL 33351		83	A COUNTY OF THE STATE OF A COUNTY OF THE STATE OF THE STA	6 연설 (44연성 10. 연 변원증이 6011, 1명성) 전 1월 8월 (141일 4 중 5) 원 (141일 5 , 141일 1 10일 1
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29 32 2	<u></u>			<u> </u>	
11. Pursuant	t to the provisions of Sections 607.0 registered agent, or both, in the Stat	502 and 607.1508, Florida Statu te of Florida, Such change was :	tes, the above-named con	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the app	of changing its registered
agent. I	am familiar with, and accept the obli	gations of, Section 607.0505, Flo	orida Statutes.	non's board of directors. Thereby accept the app	omment as registered
SIGNATURE					
g F	Signature, typed or printed name of registered a	gent and title if applicable. (NOT	E: Registered Agent signature requi	red when reinstating) DATE	
12 1		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
in e	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
	JOHNSON, BARBARA		1.2 NAME		•
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	FORT LAUDERDALE FL 3332	26-3585	1		☐ Change ☐ Addition
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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 of 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 finan address, with all other like empowered.

SIGNATURE:

FILED

Feb 10, 1999 8:00am

Secretary of State

02-10-1999 90006 031 ***150.00