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

• PROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600007089 (1)

Y BAR CENTRAL, INC.

97-AR

FILED 97 JUL 30 PH 1: 55 SECRETARY OF STATE TALLAHASSEE, FLORIDA



5/1/97

(904) 676-2090

Principal Place	o or busines	S			3544 SOUTH PENINSULA DRIVE- ORMOND BEACH FL 32127-4623					1 12011201 114 19114 91111 AE				*** **** ****
9511 SOUTH PE ORMOND BEAC		ZAE												
241 No			32174		241 North U.S.1 Ormond Beach, FL 32174				<u>,</u>	3. Date Incorporated or 01/19/1996	Qualified	3a. Da	ite of Last	Report
2. Principal Pl			<u> </u>		illing Address	<u> </u>	1 11	3217	-	4, FEI Number				Applied For
241		l						59-3362639   Not Applicat						
Suite, Apt.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional						
]		27	27					<b>b.</b> Certificate of Status D	esirea			Required		
City & State 3 Ormond Beach, FL					City & State 28 Ormond Beach, FL					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip		Coun		Zıp			Country			8. This corporation has liability for intangible tax under s. 199.0				
32174			lusia		2174	30	Vol	usia		Florida Statutes		Yes [	<del></del>	
·	9, Name	and Add	ress of Curre	nt Registere	d Agent			<del></del>		10. Name and Address of	f New Re	gistered A	Agent	
SOLO	dmon, st	ANLEY J					81	Robe	ert	A. Golden				
	SOUTH P									ess (P.O. Box Number is Not Acceptable)  • U• S• #1				
ORM	OND BEA	CH FL 32	127					J	N.					
*							83							
							84	8½m	ond	Beach,		FL		174
1. Pursuant i	to the provis	ions of Sc	ctions 607.050	02 and 607.1	1508, Florida Sta	lules, t	ne abov	e-named	corpor	ation submits this stateme	nt for the p			
office or re	egistered ag	gent, or bo	oth, in the State	offlorida (	Such change wa	s autho	prized b	y the corp	poration	ation submits this stateme i's board of directors. I her	eby acce	ot the app	ointment a	as registered
	LY	J. O.A.	Copi ine onig	ation or, so	101007.0505,	rionda	Statute	s. hant	7	Caldonl				
IGNATURE	Signature, typed	For printed ha	nic of registered ag	ci (a) Silcif an	plicable (f	VOTE: Rec	OA Derelai	Ent signature	required	Golden) wher reinstating)		1/9 DATE	<i></i>	
2.			OFFICERS AN			Ť	13.		<del>'</del>	ADDITIONS/CHANGES	TO OFFIC	CERS AND	DIRECTO	ORS IN 12
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	by certify that	at the infor	mation supplie	ed with this fi	ilina does not au	jalify fo			lated in	Section 119.07(3)(i), Flor	ida Statute	s. I further	r certify th	at the
informatio	n indicated flicer or dire	on this an	nual report or corporation of	supplements r the receive	al armual report	is true ( owered	and acc	urate and	that m	ny signature shall have the as required by Chapter 60.	same lega	al effect as	s if made i	under oath; !