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PROFIT CORPORATION **ANNUAL REPORT**

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000016484 (3)

BARRET HART ASSOCIATES, INCORPORATED

Principal Place of Business Mailing Address 831 SE 14TH SJ 831 SE 14TH ST FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0653927 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intargible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 ANDERSON, SCOTT B Name 2220 NE 52ND ST Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33308 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed minir of registered agent and bile if appropable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1.111 E HART, STEPHEN B NAME 12 NAME 831 SE 14TH ST STREET ADDRESS 13 STREET ADDRESS FT LAUDERDALE FL 33316 CITY-ST-ZIP 1.4 City - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition Change TITLE 3 1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.073 (ii) the Indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Figure 12 or Block 13 if changed, of on an attachment with an address.

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY- ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Addition

160

FILED

May 06 1998 8:00am

Secretary of State