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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000017554

1. Corporation Name

CLOWN-A-ROUND INTERNATIONAL, INC.



Principal Place of Business

2200A W OAKLAND PARK BLVD
FT LAUDERDALE FL 33311

Mailing Address

2200A W OAKLAND PARK BLVD
FT LAUDERDALE FL 33311

US
6551 NW 5th ST
MARGATE, FL 33063

US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1996

4. FEI Number

59-3364405

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 6551 NW 5th ST

2a. Mailing Address

26 6551 NW 5th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MARGATE FL

City & State

28 MARGATE FL

Zip

24 FL 33063 25 US

Zip

29 33063 30 US

9. Name and Address of Current Registered Agent

BARTON, ANDREW
2200A WEST OAKLAND PARK BLVD
FT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name BARTON ANDREW

82 Street Address (P.O. Box Number is Not Acceptable)

83 6551 NW 5th ST

84 City MARGATE

85 Zip Code FL 33063

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP

NAME BARTON, ANDREW

STREET ADDRESS 2200A WEST OAKLAND PARK BLVD

CITY-STATE-ZIP FT LAUDERDALE FL 33311

TITLE DST

NAME BARTON, TANYA

STREET ADDRESS 2200A WEST OAKLAND PARK BLVD

CITY-STATE-ZIP FT LAUDERDALE FL 33311

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP

1.2 NAME BARTON ANDREW

1.3 STREET ADDRESS 6551 NW 5th ST

1.4 CITY-STATE-ZIP MARGATE, FL 33063

2.1 TITLE DST

2.2 NAME BARTON TANYA

2.3 STREET ADDRESS 6551 NW 5th ST

2.4 CITY-STATE-ZIP MARGATE, FL 33063

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. 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 or 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 on an attachment with an address, with a letter like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/98 (954) 979-6360 Date Daytime Phone #

CR2E034 (11/98)