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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000019501 (1)

BARBARA NATHENSON ENTERPRISES, INC.

## FILED Jan 28 1998 8:00am Secretary of State

Principal Place of Business Mailing Address THE PAYSHORE OF TH					-{	ilil adıbi bible ibibi	Billi DDA	<b>81                                      </b>	
777 BAYSHO		777 BAYSHORE DR.							
FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	IN ITIB SI ACI		
1						02/29/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21 26					65-0648431	Ţ	No	t Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 7 -		dditional
22		27				5. Germond of English Booked		Fee Re	quired
City & Stat	le .	City & State				6. Election Campaign Financing			Мау Ве
Zip	Country	Zip	Col	ntry		1rust Fund Contribution		dded to	
24	25	29	30	ii ii y		This corporation owes or has pa     Personal Property Tax due June	r '		angible No
[27]	9, Name and Address of Currer		30]			10. Name and Address of New Re			1 110
NA	ATHENSON, BARBARA			81	Name				
TTT BAVOUADE DB				62	Circuit Adden	ess (P.O. Box Number is Not Acceptat	101		
FT. LAUDERDALE FL 33304				62	Street Addre	iss (P.O. Box Number is Not Acceptat	ле)		
1				83	· · · · · · · · · · · · · · · · · · ·				
				84	City		lar	Zip C	\
\$ t t				04	City		FL 85	Zip C	ode
agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or printed name of registered age	ations of, Section 697.0505, F	lorida Stal	utes.	the corporation	on's board of directors. I hereby access d when reinstating)	DATE	ont as r	registered
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	•			1.1 TITLE 1.2 NAME			☐ CI	nange	Addition
NAME	NATHENSON, BARBARAS								
STREET ADDRESS	777 BAYSHORE DR FT LAUDERDALE FL		1.3 STREET						
CITY-ST-ZIP	FI LAUDERDALE FL	DELETE		1.4 C(TY - ST - ZIP 2.1 T(TLE			Πc	hange	Addition
TITLE NAME		L_J DECETE		2.1 IIILC 2.2 NAME				larige	Nananan
STREET ADDRESS			2.3 STREET ADDRESS		ADDOCCO				
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		ì				
TITLE		DELETE	3.1 TITLE				C	nange	Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			3 4. C	IZ-SI	r- ZiP				
TITLE		☐ DELETE	E 4.1 TITLE				CI	ange	Addition
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 ST	REETA	ADDRESS				
CITY-ST-ZIP				1Y - \$1	- ZIP				TT 77.00
TITLE		☐ DELETE	5.1 TII				[_] Cr	ange	Addition
NAME			5.2 NA						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP				HTY - ST - ZIP				22000	Addition
TITLE		ריז מנינון:	6.1 7(1				∐ Cr	រករដិន	
NAME PERCENTARION			6.2 NA		inpuree				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	certify that the information supplied w	ith this filling does not qualify	for the exe			Section 119.07(3)(i), Florida Statutes. I	further certify th	at the i	information
indicated	on this annual report or supplements	annual report is true and ac	curale and	i that	t my signature	shall have the same legal effect as if	made under oa	ith; that	l I am an

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 eath, 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 chapted, or on an attachment with an address.

SIGNATURE: TO INJA X

LIT 227(427) 8991 9 PANILALL