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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600030088 (4)

BARON CAPITAL XXIX, INC.

Mailing Address

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



•	e of Business	Mailing Address				(48 B F (18 B))		I BAIBA IIII B		8) (6() (88)
Principal Place of Business 7795 COOPER ROAD		7795 COOPER ROAD								
CINCINNATI OF		CINCINNATI OH 45242-7	703							
						3. Date Incorpo 04/05/1990	rated or Qualified	3a. Dat	e of Last F	Report
2. Principal Place of Business 21		2a. Mailing Address 26					22355	00		pplied For lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of	Status Desired			Additional
22		27								lequired
City & State	υ	City & State				6. Election Cam Trust Fund C	-			May Be I to Fees
Zip	Country	Zip	Col	untry			ion has liability for			
24	25	29	30	•		Florida Statut	· -		No	a. 100.002,
	9. Name and Address of Curre	ent Registered Agent		I,		10. Name and A	ddress of New Re	gistered A	gent	
	IMERGE, MICHAEL			81	Name					
	50 U.S. HIGHWAY 19 NORTH				Street Add	ddress (P.O. Box Number is Not Acceptable)				
	TE 301									
CLE	ARWATER FL 34621			83						
1				84	City			FL	85 Zip	Codo
11 Dureuant t	to the provisions of Sections 607.05	02 and 607 1509 Florida State	utos the a	bovo	named corr	paration submits this	riatomani for the		honging	ito registered
office or re	egi ste red agent, or both, in the Stat	te of Florida. Such change was	s authorize	ed by t	the corpora	tion's board of direct	ors. I hereby acce	pt the appo	intment as	s registered
•	m familiar with, and accept the obli	gations of pection 607.0505, f	riorida Sta	nutes.						
SIGNATURE										
	Signature, typod or printed name of registered as	gent and title 4 applicable (NC	O1E: Flegistere	ed Ageri	Lsignature requi	red when reinstaling)		DATE		
	OFFICERS AF	ND DIRECTORS	O1E: Fegislere		l signature requi	ADDITIONS/CI	HANGES TO OFFIC	PERS AND	DIRECTO	RS IN 12
12.	OFFICERS AF				l signature requi	ADDITIONS/CI	HANGES TO OFFIC	PERS AND	DIRECTO	RS IN 12
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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 flinck 13 if changed, or on an adactiment with an address.

SIGNATURE: #\UU