5.7.98 B- 6780 AFTER MÁY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED May 07 1998 8:00am Secretary of State

	1998			DIVISION OF	CORPOR	, ATIC	ONS	Secretary of State	,
DOCU 1. Corporation			000453	11 (3)				
BAR-D	OC SPOR	ITS, INC.						s saultings sid adien Aliel Aneil Cabis Adiel Aneil Bode Wille aniili bida (1866) (187) (187)	
Principal Place of Business Mailing Address								II	
S308 CENTRAL AVE 5308 CENTRAL AVE ST PETERSBURG FL 33707 ST PETERSBURG FL 33707									
ST PETERSE	UNG FL 3370	17	SI PEI	ERSBURG FL 33	3707			DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
2. Principal F	Place of Busin	noce	2a Maili	ng Address				05/29/1996 . Applied Fo	
21 26				ining riddioss				59-3378464 Not Applied PC	
Suite, Apt.	#, etc.			Apt. #, etc.		_		E Cartificate of Status Decired S8.75 Addition	
22			[27]					Fee Required	
City & Stat			28	S State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country Zip 29				Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	g, Name	and Address of Cu		Agent	1301			10. Name and Address of New Registered Agent	{
BA	RTLETT, B	ARRY W				81	Name		
		ORT BLVD. S.			}	82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	36					83			
ST	. Petersb	URG FL 33707			ĺ	83			
					ſ	84	City	FL 85 Zip Code	
11. Pursuant office or a agent. I a	to the provis registered ac im familiar w	ions of Sections 607 gent, or both, in the S ith, and accept the c	7.0502 and 607.150 State of Florida. Sub Obligations of, Secti	8, Florida Statu ch change was on 607.0505, F	utes, the ab authorized forida Statu	ove by ites	e-named cor the corpora s.	rporation submits this statement for the purpose of changing its registeration's board of directors. I hereby accept the appointment as register	ered ed
SIGNATURE	Signature, typed	or printed name of registers	ed agent and title if applice	ible (NC)[E Registered	Age	nt signature requ	uired when reinstating) DATE	,
12.		OFFICERS	S AND DIRECTORS		13.	_		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			☐ DELETE	1.1 111			Change Add	dition 3
NAME		TT, BARRY W TH ST N #232			1.2 NAI				į
STREET ADDRESS CITY+ST-ZIP	•	ERSBURG FL 337	10		1.3 STF		ADDRESS		
TITLE	D	ENODONIO I E GOI		DELETE	2.1 TIT		1.4.	Change Add	dition
NAME		TT, BARRY W			2.2 NA	ME			1
STREET ADDRESS		ulfport blvd. S	S., #236		2.3 STF	REET	ADDRESS		(
CITY - ST - ZIP	ST. PET	ERSBURG FL		DELETE	2 4 CII		T-ZIP	☐ Change ☐ Adv	dition
TITLE NAME	}			L.J DECETE	3.1 TH 3.2 NA		Ì	Change Ruc	}
STREET ADDRESS	ļ						ADDRESS		,
CITY-ST-ZIP					3.4. CIT				
TITLE	7.			DELETE	4.1 7011	.E		☐ Change ☐ Ado	fition
NAME					4. 2 NA	ME			ŀ
STREET ADDRESS					1		ADDRESS		
CITY-ST-ZIP TITLE	 			DELETE	4.4 CIT		T-ZIP	Change Ado	dition
NAME					5.1 NA			v.a.go nu	
STREET ADDRESS					1		ADDRESS		1
CITY-ST-ZIP					5.4 CIT		- 1		
TITLE			, , , , , , , , , , , , , , , , , , , ,	DELETE	6.1 TITL	E	1	☐ Change ☐ Add	ition
NAME					6.2 NAX				- }
STREET ADDRESS							ADDRESS		
1 11 V . C 7 . 780					■ 64 CIT	r - VI	1.7P (

14. Thereby 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 frustee 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:

SIGNATURE: