PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

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Secretary of State DIVISION OF CORPORATIONS- -

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90107 012 ***150.00

DOCUMENT # P96000070504

1. Corporation Name

BARAKAT ENTERPRISES INC.								
	·							
	•							
Principal Place	a of Business	Mailing Address						٠ , ,
B & G HAIR DI		12215 S DIXIE HWY						;
2827 SW 32ND	=	B				DO NOT WRITE IN	I THIS SDACE	
MIAMIFL 3315 US	б	MIAMI FL 33156 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
03						08/23/1996		
2. Principal Pl	lace of Business	2a. Mailing Address-	<u> </u>		· -	4. FEI Number	<u> </u>	oplied For
21	-	26				65-0689596		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27				5. Certifcate of Status Desired	Fee F	Required
City & State	е	City & State				6. Election Campaign Financing		May Be
23		28			_	Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	try		8. This corporation owes the current y		
24	25 29 30		30	Personal Property Tax. Yes		□No		
	9. Name and Address of Current	Registered Agent		81	None	10. Name and Address of New Regis	tered Agent	
RAR	AKAT, RAMONA			°'	Name			
2827 S.W. 32ND CT.			_	82 Street Address (P.O. Box Number is Not Acceptable)				
	MI FL 33133	·		83				
			Ĺ					
				84	City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					named corpor	ation submits this statement for the purp	ose of changing it	ts 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.								registered
_	m ramiliar with, and accept the obligation	ons of, decidin oor.cooo, i for	. Olato					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent s	signature required v		ATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 12
TITLE	-		1.1 TITL	E			Change	Addition
NAME	BARAKAT, RAMONA 12N			Æ				
STREET ADDRESS	· 1		1.3 STREET ADDRESS		ADDRESS .			
CITY-ST-ZIP			1.4 CIT		ZIP			
TITLE		☐ DELETE	2.1 TITL				Change	Addition
NAME	and the second of the second o		2.2 NAM	-	•	And the second s	·	'
STREET ADDRESS	· •				ADDRESS			Ì
CITY-\$T-ZIP			2. 4 CIT		-ZIP		☐ Change	Addition
TITLE		☐ DELETE	3.1 TTT				<u> Понанде</u>	
NAME	_		3.2 NAM		ADDRESS			
STREET ADDRESS	/ / / / / / / / / / / / / / / / / / /		3.3 STF		ADDRESS			
CITY-ST-ZIP		☐ DELETE	4.1 TITL		-217		☐ Change	e
NAME			4, 2 NA					_
STREET ADDRESS					ADDRESS			
			4.4 CIT		ł			
CITY-ST-ZIP TITLE		☐ DELETE	5,1 TITL				☐ Change	Addition
NAME			5.2 NAM					
STREET ADDRESS			5.3 STR	EETA	ADDRESS	•		
C/TY-ST-ZIP			5.4 CIT	Y-\$T	ZIP			
TITLE		☐ DELETE	6.1 TTTL	E			☐ Change	Addition
			62 NAN	Æ		•		ŀ

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 all other like empowered. CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS