## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000099364 (7)

BARTIZAN AMERICAN COMMUNICATIONS, INC.

## FILED Sep 17 1997 8:00am Secretary of State



Principal Place		Mailing Address					
5209 FAR OAK CIRCLE 5209 FAR OAK CIRCLE							
SARASOTA FL	34238	SARASOTA FL 34238			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	3a. Date of Last R	teport
					12/09/1996	NIA	
2. Principal P	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·		4. FEI Number	AI	pplied For
21 602	SARASOTA GUAY	26 602 SARASOTA GUAU			65-0711678	3 1	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27			6. Certificate of Status Desired	Fee R	equired
City & State		City & State			6. Election Campaign Financing \$5.00 May Ele		
23 SARASOTA, FL		28 SARASOTA, FL			Trust Fund Contribution		to Fees
Zip	Country	Zip	Countr	•	8. This corporation owes or has pa	_ ` _	tangible No
24 3423		20 34236	30 US	) h	Personal Property Tax due June 10. Name and Address of New Re		Ø NO
	9. Name and Address of Currer	it Hegistered Agent	81	I Name	10, Name and Address of New Ne	gistered Agent	
	RROWS, JACK			NIA			
	9 FAR OAK CIRCLE		82 Street Add		iress (P.O. Box Number is Not Acceptat	ole)	
SAH	RASOTA FL 34238		83				
,			"	1			
			84	City		FI 85 Zip	Code
44 5	the sections of Continue CO7 DU	22 and 607 1509 Etorida Statu	too the abou	ue named cor	poration submits this statement for the p		te registered
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized b	by the corpora	ation's board of directors. I hereby accep	ot the appointment as	registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	Torida Statute	es.			1
SIGNATURE	Signature, typed in printed name of rogistered ag	col and leta if contrattle. (NC	11. Graisland A	ant signalus room	ired when reinstaling)	DATE	
12.		ID DIRECTORS	13.	geni a griana o rega	ADDITIONS/CHANGES TO OFFIC		3S IN 12
TITLE		DELETE	1.1 TITLE	D.	President	Change	1 volition
NAME			1.2 NAME	1.	ACK BARROWS		]:
STREET ADDRESS			1.3 STREE	T ADDRESS	ozsarasota gua	u	
CITY-ST-ZIP			1.4 CITY-		ARASOTA FL 342	36	
TITLE		☐ DELETE	21 THTLE			☐ Change	Addition
NAME			2.2 NAME				
STREET ADORESS			2.3 STREI	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP			
TITLE			3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREI	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS			ļ
CITY-ST-ZIP			5.4 CHTY	-ST - ZIP			
TITLE		DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAMI	Ε			
STREET ADDRESS			6.3 STRE	et address			
CITY-ST-ZIP			6.4 City				
14 Ldo here	by certify that the information supplies	ed with this filing does not qua	lify for the ex	emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify that	t 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; the lam 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 12 if changed, or on an indiachment with an address.

CICNATUDE.

www.

0-12-97 1941/055-7818