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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000104487 (9)

BARCO, INC. OF JACKSONVILLE

## **FILED** May 12 1997 8:00am Secretary of State



Principal Piace of Business Mailing Address  4421 CAMBRIDGE AVENUE  JACKSONVILLE FL 32210  4421 CAMBRIDGE AVENUE  JACKSONVILLE FL 32210-5311								
				3. Date Incorporated or Qualified 12/30/1996	<b>3a.</b> Da	te of La	st Report	
2. Principal Place of Business 2a. Mailing Addi	ess			4. FEI Number			Applied F	or
21 26				<u> 59- 3431.320</u>			Not Appli	cable
Suite, Apt #, etc Suite, Apt. # 27	, etc.			5. Certificate of Status Desired			5 Addition Required	
City & State City & State				6. Election Campaign Financing			00 May B	
28	Cour	ntru		Trust Fund Contribution			led to Fees	
24 25 29	30			8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes				
9. Name and Address of Current Registered Agent				10. Name and Address of New Re			<u> </u>	$\neg$
BARCO, ROBIN C ES	1	81	Name		<del></del>		*****	
7587 WILSON BOULEVARD JACKSONVILLE FL 32210		82 Street A		ss (P.O. Box Number is Not Acceptab	ole)			-
	ļ	64	City		FL	85	Zip Code	
agent I am familiar with, and accept the obligations of, Section 607  SIGNATURE  Sugnature typed or profed name of registered agent and title if applicable  12. OFFICERS AND DIRECTORS	(NOTE: Registered			d when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIREC	TORS IN 1	
	ELETE 1.1 TITL	1 F	T	ADDITIONS/OFFICIALS TO OFFIC	ALING AND	Char		ddition
NAME BARCO, CHARLES KEITH	1.2 NAI			•				
STREET ADDRESS 4421 CAMBRIDGE AVENUE	1.3 STF	REET A	ADDRESS					
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NAME BARCO, TERESA T	2.2 NA	ME						]
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STREET ADDRESS			ADDRESS					
CITY-ST-ZIP	5.4 CIT		I					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, 1 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.