

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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000011804 (6)

1. Corporation Name
BAREDJO LIMITED, INC.



Principal Place of Business 410 ATLANTIC BLVD. NEPTUNE BEACH FL 32233	Mailing Address 410 ATLANTIC BLVD. NEPTUNE BEACH FL 32233
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/03/1997	
21 Suite, Apt. #, etc.	26 12562 WILLOUGHBY LN	4. FEI Number 59-3425538		Applied For Not Applicable	
22 City & State	27 JACKSONVILLE, FL	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip 32266	28 JACKSONVILLE, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 32225	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ALDERMAN, MICHELLE 8384 BAYMEADOWS ROAD JACKSONVILLE FL 32258		10. Name and Address of New Registered Agent	
		81 Name BARRY S. LEVINE	
		82 Street Address (P.O. Box Number is Not Acceptable) 12562 WILLOUGHBY LANE	
		83 City, State & Zip Code JACKSONVILLE FL 32225	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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.

SIGNATURE **BARRY S. LEVINE** *Barry S. Levine* DATE **4-24-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D ALDERMAN, MICHELLE D	1.2 NAME	
STREET ADDRESS	8384 BAYMEADOWS RD SUITE 11B	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32258	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT - D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	BARRY S. LEVINE
STREET ADDRESS		2.3 STREET ADDRESS	12562 WILLOUGHBY LANE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	VICE PRESIDENT - D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	JOSEPH L. HOGAN
STREET ADDRESS		3.3 STREET ADDRESS	1917 BLUE RIDGE DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE **BARRY S. LEVINE** *Barry S. Levine* DATE **4-24-98** 904-247-1511

CR2E034 (10/97)