

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

FILED
Jun 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mogham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000086220 (5)

1. Corporation Name
BEEPER BARN, INC.

Principal Place of Business

5010 GRAINARY AVE.
TAMPA FL 33624

Mailing Address

5010 GRAINARY AVE.
TAMPA FL 33624



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED
1188 OCEAN SHORE BLVD.
SUITE 195
ORMOND BEACH FL 32176

3. Date Incorporated or Qualified

10/06/1997

4. FET Number

59-3472178

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

Yes No

10. Name and Address of New Registered Agent

81 Name Ralph Kennedy

82 Street Address (P.O. Box Number is Not Acceptable)

5010 Grainary Ave.

83

84 City Tampa

FL

85 Zip Code 33624

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

Signature of the person authorized to execute this statement

(NOTE: Registered Agent signature is not required when filing this statement)

DATE

6/6/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME KENNEDY, RALPH
STREET ADDRESS 5010 GRAINARY AVE.
CITY-ST-ZIP TAMPA FL 33624

TITLE
NAME
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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 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 attached sheet with an address.

SIGNATURE

300002561190
-06/16/98- 01088-029
***150.00

6-15
6/16/98 (611) 876-2332

CR2E034 (10/97)