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

**PROFIT CORPORATION** ANNUAL REPORT

1999



DOCUMENT # P97000093718

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

## FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90009 007 \*\*\*150.00

1. Corporation Name FARRAR ENTERPRISES, INC.		
Principal Flace of Business	Mailing Address	
13 WESTBY CLOSE, BRAMHALL CHESHIRE,U.K., SK7 2LZ	13 WESTBY CLOSE, BRAMHALL CHESHIRE.U.K., SK7 2LZ	

					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					10/30/1997
2 Principal F	Place of Business	2a, Mailing Address			4 FFI N server
	lace of Business				APPLIED FOR 5 93529337   Applicable Not Applicable
21		26			AFT LIED TOTT
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired
22		27			
City & Sta	te	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	y	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	9. Name and Address of Currer	nt Registered Agent	<u> </u>		10. Name and Address of New Registered Agent
			81	Name	
LA E	BELLE, RICHARD D		_		
3.146	6 LAKE DRIVE		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
PAL	M HARBOR FL 34683		83	-	
1.16	W 184 DOTT 12 0 1000		0.	<u>'</u>	
			84	City	85 Zip Code
				] "",	F'L S
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the abov	e-named co	prporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State am familiar with, and εccept the obliga	of Florida. Such change was a	uthorized by	the corpora	ation's board of directors. I hereby accept the appointment as registered
agentia	am ramiliar with, and accept the colliga	mons of, Section 607.0505, Fior	iida Statute	<b>&gt;.</b>	
SIGNATURE		(A) OF FE			uired when reinstating) DATE
	Signature, typed or printed name of registered age	ND DIRECTORS	13.	nt signature recui	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		DELETE		<del></del>	Change Addition
TITLE	D SARRAR WEN	DEFEIE	1.1 TITLE	l	
NAME	FARRAR, KEN		1.2 NAME		
STREET ADDRESS		LL, STOCKPORT	1.3 STREE	TADDRESS	
CITY-ST-ZIP	CHESHIRE, U.K. SK7 2LZ		1.4 CITY-	ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LA BELLE, RICHARD D III		2.2 NAME		
STREET ADDRESS	ALLO LANE DONE		2.3 STDE	TADORESS	
	PALM HARBOR FL 34683				
CITY-ST-ZIP	FALM HANDUN FL 34003		2. 4 CITY-	S1-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE		
NAME	].		3.2 NAMÉ		
STREET ADDRESS	3		3.3 STREE	TADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS	,			TADDRESS	
	1				
CITY-ST-ZIP	<del> </del>	☐ DELETE	4.4 CITY-	1-ZIP	Change Addition
TITLE		LT DEFEIG	5.1 TITLE		☐ Change ☐ Mounton
NAME			5.2 NAME	1	
STREET ADDF ESS	<b>3</b>		5.3 STREE	TADDRESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
OTDEET 4000 500	.[		63 STREE	T ADDRESS	

6.4 CITY-ST-ZIP 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 change 1, or on an attachment with an address, with all other like empowered

SIGNATURE: