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**PROFIT** CORPORATION\* ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000106480 (1)

BARCELONA ENTERPRISES, INC.

## FILED Apr 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 721 NE 3RD AVE. #2 721 NE 3RD AVE., #2 FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 12/15/1997 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country This corporation owes or has paid the current year Intangible ΠNo 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LIVOTI, ANTHONY M JR. 721 NE 3RD AVE., #2 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33304 83 **B4** City Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1 1 TITLE LIVOTI, ANTHONY M JR. NAME 1.2 NAME 721 NE 3RD AVE., #2 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33304 CITY-ST-ZIP 1.4 CITY - ST - ZIP ... Addition DELETE Change TITLE 21 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 City - ST - ZiP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change \_\_\_ Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP this filing does not qualify for

14. I hereby certify that the information supplied indicated on this annual report of supplied officer or director of the corporation or here Block 12 or Block 13 if changed or of the all r the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information trate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ied with this filing does not qualify for hepal annual report is true and acception or trustee empowered to ttachment with ap addit