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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800002106

BARGIELEER CORPORATION

Principal Place of Business	
320 SOUTH FLAMINGO ROAD PEMBROKE PINES FL 33027	STE. 316

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

26

320 SOUTH FLAMINGO ROAD STE. 316 PEMBROKE PINES FL 33027

FILED Jan 23, 1999 8:00am **Secretary of State**

01-23-1999 90028 005 ***150.00



Applied For Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

01/09/1998

4. FEI Number

City & State 3	Suite, Apt.	#, etc.		uite, Apt. #, etc.					5. Certi	fcate of St	atus Desire	ed l			Additional Required
Added to Fees Added to Fee	City & Stat	ity & State Zity & State			tate				6. Elect	tion Campa	aign Financ	ing ,	-		<u> </u>
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent FEINBERG, JEFFREY 4000 HOLLYWOOD BLVD. STE. 350-N HOLLYWOOD FL 33021 82 Street Address (P.O. Box Number is Not Acceptable) 53 Street Address (P.O. Box Number is Not Acceptable) 54 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 23. STREET ADDRESS 24. OTT ST. 2P 14. OTT ST. 2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition and the state of the state	23		28						Trust	Fund Cor	ntribution	- 1		Added	to Fees
9. Name and Address of Current Registered Agent FEINBERG, JEFFREY 4000 HOLLYWOOD BLVD. STE. 3SO-N HOLLYWOOD BLVD. STE. 3SO-N HOLLYWOOD FL 33021 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807,0502 and 807 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am finalize with, and eacept the obligations of, Section 607,0505, Florida Statutes. 85 SIGNATURE 85 SIGNATURE 86 Signature, typed or printed agent and tile if accidable. 86 DEBARGIEL, CHRISTOPHER 172 DELETE 12 ITTLE 12 NAME 22 NAME 23 SWEET ADDRESS 13 SWEET ADDRESS 14 CMT/-ST-ZP 175 ITTLE 10 Change 1 Addition 1 Addition	Zip	Country	Zi	Zip Cou					8. This corporation owes the current year						
FEINBERG, JEFFREY 4000 HOLLYWOOD BLVD. STE. 350-N HOLLYWOOD FL 33021 84 City FL 85 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 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 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 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 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 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 office or registered agent, or both, in the State of Florida. Such change is registered agent, or both, in the State of Florida. Such change authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Statutes, it also an authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both in the specific registered office or registered agent, or both in the State of Florida. Statutes, it also accept the specific registered agent, or both in the State of Florida. Statutes, it also accept the specific registered office or registered agent, or both in the State of Florida.	24	25	25 29 30							<u>-</u> -	-				□No
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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 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE The state of Florida same of 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE The state of Florida same of registered agent and the Faquicate. NOTE Registered Agent stratum, required when recessaring) The state of Florida same of registered agent and the Faquicate. NOTE Registered Agent stratum, required when recessaring) The state of Florida same of registered agent and the Faquicate. NOTE Registered Agent stratum, required when recessaring) The state of Florida same of registered agent and the Faquicate. NOTE Registered Agent stratum, required when recessaring) The state of Florida same of registered agent and the Faquicate. NOTE Registered Agent stratum, required when recessaring) The State Agent stratum stratum of Florida Statutes. The State Agent stratum stratum of Florida Statutes. The State Agent stratum stratum of Florida Statutes. I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the formation stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the formation is stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information is stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information is stated in Section 11	4000 HOLLYWOOD BLVD. STE. 350-N					82	Stre	et Addre	e)						
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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 agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. DELETE						84	City	,					FL	85 Zip	Code
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12. OFFICERS AND DIRECTORS IN 12 D	SIGNATURE	Signature, typed or printed name of registered agent	and title if an	policable. (NOTE:	Registered	Agent	t signat	ure required	when reinstatin	ia)			DATE		
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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	CITY-ST-ZIP		•		6.4 CF	TY-ST	-ZIP								
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	14. I hereby o	certify that the information supplied with	h this filing	does not qualify for	the exe	mptic	on sta	ted in Se	ection 119.0	07(3)(i), Fl	orida Statu	tes. I fu	rther cer	rtify that the	information

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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)