

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90011 042 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P98000071169

1. Entity Name
 TOMBARRETT&ASSOCIATES,INC.



44047709

Principal Place of Business
 4800BAYVIEWDRIVE
 #403
 FT LAUDERDALE, FL 33308

Mailing Address
 4800BAYVIEWDRIVE
 #403
 FT LAUDERDALE, FL 33308

2. Principal Place of Business
 2333 BRICKELL AVE
 Suite, Apt. #, etc.
 Suite 601
 City & State
 MIAMI FL
 Zip
 33129
 Country
 DAGE

3. Mailing Address
 2333 BRICKELL AVE
 Suite, Apt. #, etc.
 Suite 601
 City & State
 MIAMI FL
 Zip
 33129
 Country
 DAGE

07082004 Chg-P CR2E034(10/03)

4. FEI Number
 65-0855828

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIEBERMAN, STEVEN
 9130S. DADELAND BLVD.
 SUITE 1619
 MIAMI, FL 33156

7. Name and Address of New Registered Agent

Name
 Thomas Barrett
 Street Address (P.O. Box Number is Not Acceptable)
 2333 BRICKELL AVE
 Suite 601
 City
 MIAMI
 State
 FL
 Zip Code
 33129

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent.

SIGNATURE: *Thomas Barrett*

Signature, hand or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when ministering)

07-07-04

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP
☐ Delete

PSD
 BARRETT, THOMAS
 4800BAYVIEWDRIVE
 FT LAUDERDALE, FL 33308

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP
☐ Delete

TITLE
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TITLE
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 STREET ADDRESS
 CITY-STATE-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP
☒ Change ☐ Add

2333 BRICKELL AVE # 601
 MIAMI FL 33129

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP
☐ Change ☐ Add

TITLE
 NAME
 STREET ADDRESS
 CITY-STATE-ZIP
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☐ Change ☐ Add

12. 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 report or supplemental 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 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas Barrett* Thomas Barrett 7-8-04 305 633 0678

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Attachments

B8000071169

44047709



FLORIDA DEPARTMENT OF STATE
Secretary of State
Glenda E. Hood
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

First-Class Mail
U.S. Postage
PAID
State of Florida
84321

NOTICE OF INTENT TO DISSOLVE

0100945 01 AV 0 176 **AUTO TB D 1203 33308-496303



TOM BARRETT & ASSOCIATES, INC.
4800 BAYVIEW DRIVE

BARR800* 333082107 1803 17 07/03/04
NOTIFY SENDER OF NEW ADDRESS
BARRETT
2333 BRICKELL AVE APT 601
MIAMI FL 33129-2410

