

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 14, 1999 8:00 am
Secretary of State
07-14-1999 90013 011 ***150.00

DOCUMENT # **P98000106968** ✓

1. Corporation Name

JOE BARON RESIDENTIAL SERVICES, INC.

Principal Place of Business

**2129 SOUTH LAKE SHORE DRIVE
CLERMONT FL 34711**

Mailing Address

**2129 SOUTH LAKE SHORE DRIVE
CLERMONT FL 34711**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/28/1998

4. FEI Number

59-3548967

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 the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BARON, JOEY B
2129 SOUTH LAKE SHORE DRIVE
CLERMONT FL 34711**

81 Name

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

83

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 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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **STD**
STREET ADDRESS **BARON, CLAUDIA J**
CITY-ST-ZIP **2129 SOUTH LAKE SHORE DRIVE
CLERMONT FL 34711**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **PVD**
STREET ADDRESS **BARON, JOEY B**
CITY-ST-ZIP **2129 SOUTH LAKE SHORE DRIVE
CLERMONT FL 34711**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 attachment with an address.

SIGNATURE: **JOEY B. BARON**

CR2E034 (5/99)

588183-90013-11
P98000106968

Assured Accounting Services, Inc.

240 Mohawk Road
Clermont, Florida 34711
352-394-4048
Fax 352-394-3272

119 W. Lemon Street
Lady Lake, Florida 32159
352-753-1337
Fax 352-753-9336

July 8, 1999

Division of Corporation
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Joe Baron Residential Services, Inc.
I.D. # 59-3548967

Dear Sir or Madam:

Enclosed please find check number 1178 in the amount of \$150.00. The above referenced corporation is a newly formed corporation, only three days in the 1998 year, 12/28/98.

For some reason, the registered agent did not receive the original Annual Report and just received the second notice.

We are respectfully requesting that the \$400.00 penalty be waived. This will create a financial burden on this small newly formed business. The stockholders are fully aware that this fee is due before May each year, and will continue to remit the future payments in a timely manner.

Thank you for your consideration in this matter.

Very truly yours,


Peggy L. Abraham

PLA:jk
Enclosures