

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

FILED

Mar 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V68061** (3)  
1. Corporation Name  
**THE BARED COMPANY OF TAMPA, INC.**



Principal Place of Business  
**402 N REO ST  
SUITE 110  
TAMPA FL 33609  
US**

Mailing Address  
**7841 NW 56TH ST  
MIAMI FL 33166**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>8534 NW 70 St.</b>		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/28/1992</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>59-3246399</b>	
City & State <b>Miami FLA.</b>		City & State		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>33166</b>		Country <b>Dade</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24		25		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**FERNANDEZ, OLGA  
7841 N.W. 56TH ST.  
MIAMI FL 33166**

10. Name and Address of New Registered Agent

81 Name	<b>OLGA FERNANDEZ, Esq.</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>8534 N.W. 70 Street</b>
83	
84 City	<b>Miami FL</b>
85 Zip Code	<b>33166</b>

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 in printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**3-12-98**

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BARED, JOSE I.</b>	1.2 NAME	
STREET ADDRESS	<b>7841 NW 56 STREET</b>	1.3 STREET ADDRESS	<b>8534 NW 70 ST</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	<b>Miami FL 33166</b>
TITLE	<b>S</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SOUTO, RICARDO M.</b>	2.2 NAME	
STREET ADDRESS	<b>7841 NW 56 STREET</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	2.4 CITY-ST-ZIP	
TITLE	<b>T</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BARED, REBECCA</b>	3.2 NAME	
STREET ADDRESS	<b>7841 NW 56TH ST</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	3.4 CITY-ST-ZIP	
TITLE	<b>VP</b>	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BARED, CARLOS E</b>	4.2 NAME	
STREET ADDRESS	<b>7841 NW 56TH ST</b>	4.3 STREET ADDRESS	<b>8534 NW 70 ST</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	4.4 CITY-ST-ZIP	<b>Miami, FL 33166</b>
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

**3/12/98 (305) 592-4710**

CP2E034 (1097)