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1997 JUL -1 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V69162

(8)

1. Corporation Name

BARTEL OF PALM BEACH, INC.

Principal Place of Business

277 ROYAL POINCIANA WAY
PALM BEACH FL 33480

Mailing Address

277 ROYAL POINCIANA WAY
PALM BEACH FL 33480-4007

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29

30

9. Name and Address of Current Registered Agent

POSTELL, BARBARA T
277 ROYAL POINCIANA WAY
PALM BCH FL 33480

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this 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: Register

Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME POSTELL, BARBARA T.
STREET ADDRESS 277 ROYAL POINCIANA WAY
CITY-ST-ZIP PALM BEACH FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

DELETE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this annual report or supplemental annual report is true and accurate. 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.

3. Date Incorporated or Qualified

10/02/1992

3a. Date of Last Report

07/23/1996

4. FEI Number

65-0352030

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

I, the above-named corporation submits this statement for the purpose of changing its registered agent by the corporation's board of directors. I hereby accept the appointment as registered agent.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

80000223048-6
-07/08/97-01070-025
****165.00 ****165.00

CR2E034 (9/96)