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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F9600000721 (8)
TGF CORPORATION

FILED Feb 24 1998 8:00am Secretary of State



22 Principal Place of Business 2a. Mailing Address 4. FEI Nu 34- 3	DO NOT WRITE IN THIS SPACE **Recorporated or Qualified** 2/1996 Imber
CLEVELAND OH 44H4- 144 15 - 1603	Applied For Not Applicable 2/1996 Applied For Not Applicable 2/1818086 Cate of Status Desired \$8.75 Additional Fee Required 300 May Be Added to Fees 301 Property Tax due June 30. Yes No 302 Address of New Registered Agent 303 Applied For Not Acceptable
2. Principal Place of Business 2a. Mailing Address 4. FEI Nu	Applied For Not Applicable 2/1996 Applied For Not Applicable 2/1818086 Cate of Status Desired \$8.75 Additional Fee Required 300 May Be Added to Fees 301 Property Tax due June 30. Yes No 302 Address of New Registered Agent 303 Applied For Not Acceptable
22 Principal Place of Business 2a Mailing Address 34 FEI Nu	2/1996 Imber
21	## Not Applicable ## Sa.75 Additional Fee Required ## Required ## Sa.75 Additional Fee Required ## Required ## Sa.75 Additional Fee Required ## Required ## Sa.75 Additional Fee Required ## Added to Fees ## Property Tax due June 30. Yes No ## Address of New Registered Agent ## Number is Not Acceptable)
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 5. Certific	sate of Status Desired \$8.75 Additional Fee Required Status Desired \$5.00 May Be Fund Contribution Added to Fees Corporation owes or has paid the current year Intangible and Property Tax due June 30. Yes No and Address of New Registered Agent Yours Not Acceptable)
27	Fee Required The Required Th
City & State City & State City & State City & State 28 Country Zip Country Zip Country R. This country Country Country Country Country Country R. This country R. This country Country R. This country	Fund Contribution Added to Fees Orporation owes or has paid the current year Intangible hal Property Tax due June 30. Yes No and Address of New Registered Agent X Number is Not Acceptable)
Zip Country Zip Country 8. This country 29 30 Person 9. Name and Address of Current Registered Agent 10. Name AUSTIN GROUP, INC. 1408 N WESTSHORE BLVD STE 1002 TAMPA FL 33607 83 84 City City Country 8. This country 10. Name 81 Name 82 Street Address (P.O. Box 83 City Research 84 City City Research 85 City Research 85 City Research 86 City Research 87 Country 8. This country 8. This country 10. Name 1	orporation owes or has paid the current year Intangible hal Property Tax due June 30. Yes No and Address of New Registered Agent X Number is Not Acceptable)
24 25 29 30 Person 9. Name and Address of Current Registered Agent AUSTIN GROUP, INC. 1408 N WESTSHORE BLVD STE 1002 TAMPA FL 33607 83 Person 10. Name 81 Name 82 Street Address (P.O. Box 83 84 City	and Property Tax due June 30. Yes No and Address of New Registered Agent x Number is Not Acceptable)
9. Name and Address of Current Registered Agent AUSTIN GROUP, INC. 1408 N WESTSHORE BLVD STE 1002 TAMPA FL 33607 10. Name 81 Name 82 Street Address (P.O. Box	and Address of New Registered Agent Number is Not Acceptable)
AUSTIN GROUP, INC. 1408 N WESTSHORE BLVD STE 1002 TAMPA FL 33607 81 Name 82 Street Address (P.O. Box 83 City	Number is Not Acceptable)
1408 N WESTSHORE BLVD STE 1002 TAMPA FL 33607 82 Street Address (P.O. Box B4 City	les 7in Code
STE 1002 TAMPA FL 33607 83 B4 City	les Zin Code
TAMPA FL 33607 83 84 City	85 Zip Code
B4 City	85 Zip Code
	85 Zip Code
\$4. Descript to the provisions of Scatteris 607 (602 and 607 1508 Elevide Statutes the shown named corneration subm	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of	f directors. I hereby accept the appointment as registered
agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.	
SIGNATURE	o) DATE
Signature: typed or printed name of registered agent and this diapplication (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS 13. ADDITION 13.	ONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P DELETE 1.5 TITLE	Change Addition
NAME CALABRESE, STEVEN A 1.2 NAME	
STREET ADDRESS 1110 EUCLID AVE., STE. 300 1.3 STREET ADDRESS	
CHEVELAND OU 44115	
1.4 City-51-2iP	☐ Change ☐ Addition
NAME CALABRESE, STEVEN M- A 2.2 NAME	
STREET ADDRESS 1110 EUCLID AVE., STE. 300 2.3 STREET ADDRESS	
CITY-ST-ZIP CLEVELAND OH 44115 2.4 CITY-ST-ZIP	
THE S DELETE 3.1 THE	Change Addition
NAME CALABRESE, ERIC M 32 NAME	
STREET ADDRESS 1110 EUCLID AVE., STE. 300 3.3 STREET ADDRESS	
CITY-ST-ZIP CLEVELAND OH 44115	
TITLE DELETE 41 TITLE	☐ Change ☐ Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-S1-2IP 44 CITY-ST-ZIP	
TITLE DELETE 51 TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-SI-ZIP 5.4 CITY-ST-ZIP	
THILE DELETE 64 TITLE	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-SI-ZIP 6.4 CITY-ST-ZIP	07/07/10 5
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0	J7(3)(1), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an
indicated on this annual report of supplied annual report is true and accurate and that my signature shall have officer or director of the corporation or thorighner or trustee empowered to execute this report as required by Char Block 12 or Block 13 if the hanged. Ye do not not with an address.	pter 607, Florida Statutes; and that my name appears in

SIGNATURE

2/16/58