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

Mailing Address

STE 3110

27

28

301 YAMATO ROAD

2a. Mailing Address

City & State

Suite, Apt. #, etc.

BOCA RATON FL 33431

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

Principal Place of Business

2. Principal Place of Business

301 YAMATO ROAD STE 3110

US

21

22

23

BOCA RATON FL 33431

Suite, Apt. #, etc.

City & State

STREET ADDRESS 3. . .

CITY-ST-ZIP

DOCUMENT # P97000017191

TICKET JUSTICE CENTER, INC.

Country 8. This corporation owes the current year Intangible Zio Zip Country ΠNo Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent LEIFERT, DOUGLAS Street Address (P.O. Box Number is Not Acceptable) 82 301 YAMATO ROAD STE 3110 83 **BOCA RATON FL 33431** 85 Zip Code 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE LEIFORT, DOUGLAS I. 12 NAME NAME **301 YAMATO RD STE 3110** 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33731** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME. NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 51TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY+ST-ZIP Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 公司等 医胃内脏 经产品

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 fue 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 unsteed empowered to execute this report as required by Chapter 607 Florida Statutes; and that my name appears in

FILED May 03, 1999 8:00 am Secretary of State

05-03-1999 90063 042 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

02/24/1997 4. FEI Number

65-0746165

CR2E034 (11/98)

SIGNATURE REQUIRE

3619 561958