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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Kather ne Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90055 024 ***150.00

| DOCL | JMENT | # 1 | 920 | 20 |
|------|--------------|-----|-----|----|

1. Corporat on Name

CITY-ST-ZIP

TUPPEN'S, INC.

| - 1 | | | | | | | | |
|--|---|---------------------------------|--|---|-------------------------------------|--|----------------------|----------------|
| Principal Place | of Business | Mailing Address | | | | | #1#11 #1#11 #1#11 #1 | 711 81811 1881 |
| 1002 N DIXIE H | WY. | 1002 N DIXIE HWY. | | | | | | |
| LAKE WORTH F | L 33460-2119 | LAKE WORTH FL 33460-2 | 119 | | | DO NOT WRITE IN TH | S SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed 04/02/1956 | | |
| 2 Principal Pl | ace of Business | 2a, Maiting Address | | | | 4. FEI Number | Apr | ed For |
| 21 7 1110 | acc o. 200co | 26 | | | | 59-0766938 | Not | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 A | dditional |
| 22 | | 27 | | | | 5. Certificate of Status Desired | Fee Red | quired |
| City & S ate | 9 | City & State | | | | 6. Electio i Campaign Financing | \$5.00 | |
| 23 | | 28 | | | | Trust Fund Contribution | Added to | Fees |
| Zip " | Country | Zip | Cou | intry | | 8. This corporation owes the current year | | (7a)- |
| 24 | 25 | 29 | 30 | | | Personal Property Tax. | | i⊒No |
| | 9. Name and Address of Curre | ent Registered Agent | - | 81 | Name | 10. Name and Address of New Registere | n Agent | |
| TI (DE | PEN,RONALD | | | " | Name | | | |
| | N. DIXIE HWY. | | | 82 | Street Ac dr | ess (P.O. Box Number is Not Acceptable) | | |
| | WORTH FL 33460 | | | 83 | | | | |
| LANE | WOMIN 1 E 33400 | | | 83 | | | | |
| | | | | 84 | City | F | 85 Zip C | ode |
| | | 500 I COT AEOD Elevide Ctet | | have | nomed or ro | oration submi s this statement for the purpose | | registered |
| office c r r | enistered agent, or both, in the Stat | te of Florida. Such change was | authorized | ז עס נ | he corporation | on's board of directors. I hereby accept the app | ointment as rec | stered |
| agent. a | m familiar with, and at cept the oblid | tations of Section 607.0505, Fi | orida Stati | utes. | | 1/25/ | ha | |
| SIGNATURE | Mercuan | × Tappe | Paradana | Agent | nineature roas ira | d when reinstating) | 79 | |
| 12. | Signature, typed or printed na ne of registered a | AN() DIRECTORS | 13. | Agent | aigriatoro require | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTO | RS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 Ti | TLE | | | ☐ Change | Addition |
| NAME | TUPPEN,RONALD E | | 1.2 N/ | AME | | | | |
| STREET ADDRESS | 1002 N. DIXIE HIGHWAY | | 1351 | TREET, | ADDRESS | | | |
| CITY-ST-ZIP | LAKE WORTH FL | | | ITY-ST- | ł | | | |
| TITLE | SD | ☐ DELETE | 2.1 TI | | | | ☐ Change | Addition |
| NAME | TUPPEN, SHERMAN L., JR. | | 2.2 N/ | AME | | | | |
| STREET ADDRESS | 1002 N. DIXIE HIGHWAY | | 2.3 ST | TREET | ADDRESS | | | |
| CITY-ST-ZIP | LAKE WORTH FL | | 2.4 C | TY-ST | r_71P | | | |
| TITLE | Date Wolfins | | | | | | | _ |
| NAME | | ☐ DELETE | 3.1 TI | | | | ☐ Change | ☐ Addition |
| STREET ADDRESS | | ☐ DELETE | 3.1 TI 3.2 N | TLE | | | Change | ☐ Addition |
| CITY-ST-ZIP | | ☐ DELETE | 3.2 N | TLE AME | ADDRESS | | ☐ Change | Addition |
| TITLE | | ☐ DELETE | 3.2 NA 3.3 ST | TLE AME | ADDRESS | | ☐ Change | ☐ Addition |
| | | ☐ DELETE | 3.2 NA 3.3 ST | TLE AME TREET | ADDRESS | | ☐ Change | ☐ Addition |
| NAME | | | 3.2 N/ 3.3 ST 3.4. C | TLE AME TREET A SITY-ST TLE | ADDRESS | | | |
| NAME STREET ADDRESS | | | 3.2 N 3.3 ST 3.4. C 4.1 TI 4. 2 N | TLE AME TREET ITY-ST TLE IAME | ADDRESS | | | |
| STREET ADDRESS | | | 3.2 N/ 3.3 S1 3.4. C 4.1 TI 4. 2 N 4.3 S | TLE AME TREET ITY-ST TLE IAME | ADDRESS F-ZIP ADDRESS | | | |
| | | | 3.2 N/ 3.3 S1 3.4. C 4.1 TI 4. 2 N 4.3 S | TLE AME TREET ITY-ST TLE IAME TREET | ADDRESS F-ZIP ADDRESS | | | |
| STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 3.2 NJ 3.3 ST 3.4. C 4.1 TI 4. 2 N 4.3 ST 4.4 CI | TLE AME TREET TLE IAME TREET TREET TREET | ADDRESS F-ZIP ADDRESS | | ☐ Change | ☐ Addition |
| STREET ADDRI SS CITY-ST-ZIP TITLE NAME | | ☐ DELETE | 3.2 N/ 3.3 ST 3.4. C 4.1 TI 4. 2 N 4.3 S ² 4.4 CI 5.1 TI 5.2 N/ | TLE AME TREET TLE IAME TREET ITY-ST TLE AME | ADDRESS F-ZIP ADDRESS | | ☐ Change | ☐ Addition |
| STREET ADDRI SS CITY-ST-ZIP TITLE NAME STREET ADDRI SS | | ☐ DELETE | 3.2 N/ 3.3 ST 3.4. C 4.1 TI 4. 2 N 4.3 S' 4.4 CI 5.1 TI 5.2 N/ 5.3 S' | TLE AME TREET TLE IAME TREET ITY-ST TLE AME | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS | | ☐ Change | ☐ Addition |
| STREET ADDRI SS CITY-ST-ZIP TITLE NAME | | ☐ DELETE | 3.2 N/ 3.3 ST 3.4. C 4.1 TI 4. 2 N 4.3 S' 4.4 CI 5.1 TI 5.2 N/ 5.3 S' | TLE AME TREET TLE IAME TREET ITY-ST TLE AME TREET | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS | | ☐ Change | ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ DELETE | 32 N 33 ST 34.C 4.1 TT 4.2 N 43 S' 44 CI 5.1 TT 5.2 N 5.3 S' 5.4 CI | TILE TREET, TILE TILE TREET, TILE TREET, TITY-ST TILE TREET TREET TREET TREET | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS | | ☐ Change | ☐ Addition |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 7(3)(i), Florida Statutes. I further sertify 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 change 170 or an attactment with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE SIGNING OFFICER OR DIRECTOR