PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

TAVADE DITCINICO CEDVICES INC

STEWART BUSINESS SERVICES INC								
Principal Place of Business Mailing Address							818() VI	
1224 RIDGEWOOD AVENUE 1224 RIDGEWOOD AVENUE								
VENICE FL 34292 VENICE FL 34292				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed	3 SI ACL		
					11/09/1972			ı
2. Principal Place of Business	2a. Mailing Address				4. FEI Number	Т.	App	lied For
21	26				59-1423666	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.			_		5. Certificate of Status Desired	\$8.	75 A	dditional
27					5. Certificate of Status Desired	Fe	e Rec	juired
City & State City & State					6. Election Campaign Financing	· -		May Be
23 28				Trust Fund Contribution		ded to	Fees	
Zip Country 25	Zip Count 29 30				This corporation owes the current year I Personal Property Tax.	ntangible Yes		□No
9. Name and Address of Current I	Registered Agent				10. Name and Address of New Registere	d Agent		
DALES DISULADO IV			81	Name				
BALES, RICHARD W.			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
3128 NOVUS STREET					·			
SARASOTA FL 34237			83					
			84	City	F	L 85	Zip C	ode
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation SIGNATURE	ns of, Section 607.0505	, Fiorida Stati	ites.	e-named corporation		of changir ointment	ng its r as reg	egistered istered
Signature, typed or printed name of registered agent a 12. OFFICERS AND		13.	- Gran	signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTO	RS IN 12
TITLE PD	☐ DELETE 1.1 T					[] Cha		Addition
NAME BALES, RICAHRD		1.2 NA	ME					
STREET ADDRESS 3128 NOVUS ST		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP SARASOTA, FL 00000		1.4 CF	1.4 CITY-ST-ZIP		<u></u>			
TITLE VPD	☐ DELET	E 2.1 TIT	LE			Cha	ange	☐ Addition
NAME MACINTYRE, SANDRA R.	ACINTYRE, SANDRA R. 22N		2.2 NAME					
STREET ADDRESS 2708 SERPULA RD.		2.3 STRE		ADDRESS				
CITY-ST-ZIP VENICE FL		2.4 CI	IY-S	T- ZIP				F-7 5 1 1/4
TITLE STD	☐ DELET	E 3.1 ∏1	LE			Cha	inge	Addition
NAME BALES, DONNA J.		3.2 NA	3.2 NAME					
STREET ADDRESS 3128 NOVUS STREET		3.3 ST	3.3 STREET ADDRESS					
CITY-ST-ZIP SARASOTA FL			3.4. CITY-ST-ZIP			∏ Cha		Addition
TITLE	☐ DELET		4.1 TITLE			∐ ¢na	nge	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP	□ DELET		4.4 CITY-ST- 5.1 TITLE			Cha	nae	Addition
TILE (5.1 III					57	L_1 . 300.3011
NAME OTREST ADDRESS				ADDRESS				
STREET ADDRESS		1 * 5,		r-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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

May 07, 1999 8:00 am Secretary of State

05-07-1999 90040 002 ***150.00

941-484-2408

Change

Addition

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