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 # 439810

(3)

T & H ENTERPRISES, INC.

Mailing Address

105 SOUTH BREVARD AVENUE P O BOX 789 ARCADIA FL 33821

Principal Place of Business

105 SOUTH BREVARD AVENUE P O BOX 789

P O BOX 789 ARCADIA FL 33821

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified
 11/14/1973

FILED

Feb 02 1998 8:00am

Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 28 Country Suite, Apt. #, etc. Suite,	2. Principal Place of Business		2a. Mailing Address			4. FEI Number		ited For	
City & State Ci	21		26			59-1535389	Not.	Not Applicable	
25 Country 26 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name			,			5. Certificate of Status Desired	1 1		
20 Country 70 Country 8. This exposure nows on his sould the supper view in anothby personal Property fac view time of 10. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address 10. Name and Address 10. Name and Address 10. Name and	The state of the s			State					
Section Programmer Progra									
9. Name and Address of Current Registered Agent TURNER, EUGENE H., SR. 105 SOUTH BREVARD AVENUE ARCADIA FL 33821 84 City FL 85 Cip Code 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 11. Persuant to the processor of sections (P7.1592 and 607.1594, Hards Statutes, 1 City Code) 12. City Code 13. ADDITIONS(CHANGES IO OPERICHES AND DIRECTORS IN 12 14. City Code 15. ADDITIONS(CHANGES IO OPERICHES AND DIRECTORS IN 12 15. ADDITIONS(CHANGES IO OPERICHES AND DIRECTOR	24	25	29	30	The selection and it has been the selection from				
TUTION CULTURE ARCADIA FL 33821 32 Street Address (P.O. Box Number is Not Acceptable) 33 Set Unity FL S5 Tip Code 11. Pursuant to the provisions of Sections 697 0502 and 607 1509, Florida Statutes, the above-hamed corporation submits this shafement for the purpose of changing its requisitered signal, or box in the Solan of Florida Statutes, the above-hamed corporation submits this shafement for the purpose of changing its requisitered signal, or box in the Solan of Florida Statutes, the above-hamed corporation submits this shafement for the purpose of changing its requisitered signal, or box in the Solan of Florida Statutes and or application of Solan of Solan Statutes, the above-hamed corporation submits this shafement for the purpose of changing its requisitered signal, or box in the Solan of Florida Statutes and or application of Solan of Solan Solan Statutes (Political Statutes) Solan of Solan of Solan Solan of Solan of Solan Solan Solan of Solan Sol		9. Name and Address of Current I			10. Name and Address of New Registered Agent				
105 SOUTH BREVARD AVENUE ARCADIA FL 33821 107 11. Pursuant to the provisions or Sections 607 0502 and 607 1506, Horida Statutes, the stowe-trained corporation submits this skiletement for the purpose of changing its registered agent, or both, in the slate of Florida, Such change was authorized by the cut registered agent, or both, in the slate of Florida, Such change was authorized by the cut registered agent, or both, in the slate of Florida, Such change was authorized by the cut registered agent, or both, in the slate of Florida Statutes, the atove-trained corporation submits this skiletement for the purpose of changing its registered agent, or both, in the slate of Florida Statutes, the atove-trained or provide in south of directors. I hereby certain with, end acceptable or change agent and aminate vitin, end acceptable agent and aminate vitin, end acceptable agent and aminate with, end acceptable agent agent and aminate vitin, end acceptable. 12. CPFICHERS AND DIRECTORS 13. 13. ADDITIONS/CHANGES TO OFFICIERS AND DIRECTORS IN 12. 14. TIME SECRETARY	TU	IRNER, EUGENE H., SR.		81	81 Name				
ARCADIA FL 33821 83 84 City FL 85 Zip Code 11. Pursuant to the provisions or Sections 607 0502 and 607 1508, Horida Statutes, the above-named corporation submits this whetevent in the purpose of changing its resilistened office or registered agent, or both, and accept the children of Horida Such change was authorized by the curporation's board of directors. I hereby accept the appointment as registered agent and an animalar with, and accept the children of Horida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12. TURNER, EUGENE H. (SD) 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12. TURNER, EUGENE H. (SD) 15. SACRETARY 15. LIGHTS TO TURNER, FLORIDA DIRECTORS IN 12. 17. TURNER, EUGENE H. (SD) 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12. 17. TURNER, EUGENE H. (SD) 15. SACRETARY 15. MADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12. 17. TURNER, EUGENE H. (SD) 15. SACRETARY 15				92	60 Ctreat Address (D.C. Cov. Klumber of Net Aggerstable)				
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 agent, or both, in the state or Florida. Such change was authorized by the curporation'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. 12. OFFICE-IRS AND DIRECTORS 13. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 TOPICS OFFICE-IRS AND DIRECTORS IN 12 TURNER, EUGENE H. (SD) 12. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 TURNER, EUGENE H. (SD) 12. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 TURNER, EUGENE H. (SD) 12. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 TURNER, EUGENE H. (SD) 12. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 TURNER, EUGENE H. (SD) 12. ADDITIONS/CHANGES IO OFFICERS AND DIRECTORS IN 12 13. SHEET AUDRES IO S S BREVARD AVE 14. GITV-51-JP ARCADIA, FLORIDA 33821 14. GITV-51-JP ARCADIA, FLORIDA 33821 16. GREVARD AVE 22. MAME 23. SIRRET AUDRES IO S S BREVARD AVE 44. GITV-51-JP ARCADIA, FLORIDA 33821 17. ADDITIONS/CHANGES IO S S BREVARD AVE 45. GREVARD AVE 47. GR				102	Street Address (M.O. box Number is Not Acceptable)				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Horida Statutes, the above-harmed corporation submits this shatement for the purpose of changing its regulatered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent and many accept the Appointment as registered agent. I am harmonized agent and many accept the Appointment as registered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both in the shate of Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the Appointment as a supplier and the Appointment and the Appo	ru i	IONDIA I E GOOZ I		83	83				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Horida Statutes, the above-harmed corporation submits this shatement for the purpose of changing its regulatered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent and many accept the Appointment as registered agent. I am harmonized agent and many accept the Appointment as registered agent, or both, in the shate or Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both in the shate of Florida. Such change was authorized by the curporation's board of directors. I hereby accept the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the shate of the Appointment as registered agent, or both in the Appointment as a supplier and the Appointment and the Appo				<u> </u>					
agent I am Bamiliar with, end except the valoration Such change was authorized by the curporation's board of directors. I hereby accept the exponitionant as registered agent and manual manual with unique conductions because the voligations of year or possed manual registered agent and told of accordable. Control Control				84	City		85 Jip Co	de	
agent I am Bamiliar with, end except the valoration Such change was authorized by the curporation's board of directors. I hereby accept the exponitionant as registered agent and manual manual with unique conductions because the voligations of year or possed manual registered agent and told of accordable. Control Control	11. Pursuant	to the provisions of Sections 607 0502	and 607.1508. Florida Statute	s, the above	e-named corpo	oration submits this statement for the p	urpose of changing its	registered	
SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 TITLE VI	office or a	registered agent, or both, in the State of	Florida. Such change was ai	uthorized by	y the corporation				
Signature, Pripade or periodic marker or registered Agent scratture regis	~	am ramiliar wan, and accept the obligation	ous of pection poymons, their	nga statulet	s.				
TZ. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VI	SIGNATURE	Signature Cycled or proceed name of proceeding arrent a	and title if appareable. INCUE	Hegistered Ace	ent signature require	d when reinstating)	DATE		
NAME STREET ADDRESS OTTY-ST-ZP ARCADIA, FLORIDA 33821 DELETE 21 ITTLE NAME STREET ADDRESS CATY-ST-ZP ARCADIA STREET ADDRESS CATY-ST-ZP STREET ADDRESS STREET ADDRESS CATY-ST-ZP STREET ADDRESS S	12,	The state of the s					ERS AND DIRECTORS	IN 12	
NAME 105 S BREVARD AVE 106 S BREVARD AVE 107 S S BREVARD AVE 107 S S BREVARD AVE 108 ARCADIA, FLORIDA 33821 109 ARCADIA, FLORIDA 33821 100 S BREVARD AVE 1	naf	VT	DELETE	11 TITLE		SECRETARY	Change	X Addition	
SIRECT ADDRESS OTTY-ST-IP ARCADIA, FLORIDA 33821 DEFETE OTTY-ST-IP NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS OTTY-ST-IP NAME STREET ADDRESS STREET ADD	NAME	TURNER, FUGENE H. (SD)		1.2 NAME					
ARCADIA, FLORIDA 33821 I 4 GITY-SIT-JIP ARCADIA FL 34266 TITLE MAME 22 MAME 22 MAME 23 SIRRET ADDRESS GITY-SIT-JIP TITLE DELETE 31 FILLE 33 SIRRET ADDRESS GITY-SIT-JIP TITLE DELETE 41 TITLE Addition				8 1.3 STREET	ALIOBESS	105 S BREVARD AVE		\ { {	
DELETE 21 HTLE Change Addition Change Addition Change Addition Change Change Addition Change Change Addition Change Change Addition Change Change Addition Change Change Change Addition Change Change Change Addition Change Ch		,		RX				5	
NAME STREET ADDRESS CITY-ST-7/P TITLE DELETE 41 TITLE Addition STREET ADDRESS CITY-ST-7/P TITLE DELETE 41 TITLE Addition STREET ADDRESS CITY-ST-7/P TITLE DELETE 41 TITLE Addition A			DELETE				Change	Addition C	
2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-7IP				R 22 NAME	}			\ \	
2 4 CITY-ST-7IP				2.3 STREET	ADDRESS			!	
DELETE STIRLE DELETE STIRLE Change Addition NAME SZ NAME SZ NAME STREET ADDRESS SZ NAME SZ NAME STREET ADDRESS SZ NAME S				2.4 City-3	ST-7IP			1	
STREET ADDRESS STRE		phdditterifedom	DELETE		1		Change	Addition	
GITY-SI-ZIP TITLE DELETE 4.1 TITLE Addition Addition AVAIME SIREEL ADDRESS GITY-SI-ZIP TITLE DELETE 4.4 CITY-SI-ZIP TITLE DELETE Addition Addition Addition Change Addition Change Addition Change Addition Addition Addition Addition DELETE SIREEL ADDRESS GITY-SI-ZIP TITLE DELETE ANAME SIREEL ADDRESS GITY-SI-ZIP Addition AME SIREEL ADDRESS GITY-SI-ZIP Addition	NAME			3.2 NAME	1				
THE DELETE 4.1 TITLE Change Addition NAME SIREET ADDRESS CITY - ST-ZIP THE DELETE 5.1 TITLE Change Addition NAME SIREET ADDRESS CITY - ST-ZIP THE DELETE 5.1 TITLE Change Addition SAME SIREET ADDRESS CITY - ST-ZIP SA CITY - ST-ZIP NAME SA STREET ADDRESS CITY - ST-ZIP NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY - ST-ZIP NAME STREET ADDRESS CITY - ST-ZIP Addition STREET ADDRESS CITY - ST-ZIP Addition STREET ADDRESS CITY - ST-ZIP Addition STREET ADDRESS 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	STREET AUDRESS			3.4 STREET	ADDRESS			!	
TITLE NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY - ST- ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS 4.4 CITY - ST- ZIP TITLE NAME 5.2 NAME 5.3 STREET ADDRESS CITY - ST- ZIP STREET ADDRESS CITY - ST- ZIP TITLE DELETE 5.4 CITY - ST- ZIP NAME 5.2 NAME 5.3 STREET ADDRESS CITY - ST- ZIP NAME 5.4 CITY - ST- ZIP NAME 5.7 NAME 5.8 NAME 5.8 NAME 5.8 STREET ADDRESS CITY - ST- ZIP 1.4 Thereby 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	GITY-SI-ZIP			3.4 GITY-8	ST-ZIP			1	
SHEET ADDRESS CITY-ST-ZIP TITLE DELETE S.T TITLE S.AME SAME SHEET ADDRESS CITY-ST-ZIP TITLE S.T TITLE S.T TITLE S.T NAME SHEET ADDRESS CITY-ST-ZIP SAME S.AME S.AME S.AME S.AME S.AME S.AME SAME SAME SAME SAME SAME SAME SAME S		The second secon	DELETE	4.1 TITLE			Change	Addition	
CITY-ST-ZIP TITLE DELETE S.T TITLE SAME SAME SAME SAME SA STREET ADDRESS CITY-ST-ZIP DELETE S.T TITLE DELETE S.T TITLE Change Addition Addition Change Addition	NAME			4. 2 NAME	l				
TITLE DELETE 5.1 TITLE Change Addition NAME \$18KE1 ADDRESS \$1 STREET ADDRESS \$2 NAME \$3.1 STREET ADDRESS \$4 CITY - \$1 - 72P THE DELETE 5.1 TITLE \$3.1 TITLE \$4.1 TITLE \$5.2 NAME \$5.3 STREET ADDRESS \$6.2 NAME \$6.2 NAME \$6.3 STREET ADDRESS \$6.4 CITY - \$1 - 72P 14.1 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	STREET AUORESC			4.3 STREET	ADDRESS			!	
TITLE DELETE 5.1 TITLE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP TITLE 5.1 TITLE 5.2 NAME 5.3 SIREET ADDRESS CITY-ST-ZIP TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS CITY-ST-ZIP Addition	CITY+ST-ZIP			4.4 CITY-S	1-21P			j	
SIRECT ADDRESS CITY-ST-ZIP TITLE DELETE 5.3 SIRECT ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition			DELETE	5.1 TITLE		A275270131. Academic	Change	Addition	
CITY-SI-ZIP TITLE DELETE 5.1 TITLE NAME 5.2 NAME 6.3 STREET ADDRESS CITY-SI-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	NAME.			5.2 NAME	1				
CITY-S1-ZIP TITLE DELETE 5.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-S1-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				5.3 STREET	ADDRESS				
TITLE DELETE 5.1 TITLE Change Addition NAME. STREET ADDRESS CITY-ST-7IP 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.				E.	1			!	
NAME 5:REEI ADDRES 6:2 NAME 6:3 STREET ADDRESS CITY-ST-7/P 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	- HILLIAN	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETÉ				Change	Addition	
63 STREET ADDRESS 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				N.	}				
CITY-ST-7IP 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				63 STREET	ADDRESS				
14. Thereby 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				N.	Į.			ļ	
	14. I hereby i	ertity that the information supplied with	this filing does not qualify for	the exempl	tion stated in S	ection 119.07(3)(i), Florida Statutes. I f	urther certify that the in	tormation	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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.

SIGNATURE:

SIGNATORIF AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OF

EUGENE H TURNER SR 01-26-98 941-494-477

Davime Phone 8 0462775