PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F22536

1. Corporation Name

THOMAS	S INVESTMENT CORPORATI	ON					
Principal Place	e of Business	Mailing Address				TIBIS BIBSI BIBIS BIBIS	BIBSI BIBII INDI
300 FIRST AVENUE S. SUITE 402 300 FIRST AVENUE S. SUITE ST PETERSBURG FL 33701 ST PETERSBURG FL 33701					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed 03/07/1981		
Principal Place of Business 2a. Mailing Address				_	4. FEI Number	A	pplied For
21		26			59-2077275		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	Additional equired
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25	Zip 29 36	Countr	У	This corporation owes the current year Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registe	ered Agent	
			8	1 Name			
300	DING, CHARLES RANDOLPH FIRST AVENUE S		8:	2 Street Addr	ess (P.O. Box Number is Not Acceptable)		
SUITE 402			8:	3			
ST PETERSBURG FL 33701			8	4 City		FL 85 Zip	Code
	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such change was aurions of, Section 607.0505, Florid	a Statute		oration submits this statement for the purpo on's board of directors. I hereby accept the a	эрролипол из г	egistered [
12.	OFFICERS AN		13.	en agracaro roquiro	ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12
TITLE	DP	☐ DELETE 1.				Change	Addition
NAME	WEDDING, CHARLES RANDOLPH		1.2 NAME		•		
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL 33701		1.4 CITY-	ST-ZIP			
TITLE			2.1 TITLE	f		☐ Change	☐ Addition
NAME	WEDDING, JUNE A.		2.2 NAME				
STREET ADDRESS	300 FIRST AVE S., SUITE 402		1	ET ADDRESS			
CITY-ST-ZIP ·	ST PETERSBURG FL 33701		2. 4 CITY			Change	Addition
TITLE		☐ DELETE	3.1 TITLE			onongo	
NAME			3.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	☐ DELETE		3.4. CITY-ST-ZIP			☐ Change	Addition
TITLE	'	- 5555.14	4. 2 NAM			_ •	
NAME			1	ET ADDRESS			
STREET ADDRESS			4.4 CITY-				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME		_	5.2 NAME				
STREET ADDRESS)		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	_		
TIRE		□ DELETÉ	6.1 TITLE	_		Change	Addition

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

πιΕ

NAME

STREET ADDRESS

CITY-ST-ZIP



☐ DELETE

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90037 045 ***150.00