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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 06, 1999 8:00am **Secretary of State**

02-06-1999 90029 025 \*\*\*150.00

## DOCUMENT # F9400003877

TVO SOUTHWEST, INC.

Sulte, Apt. #, etc.    20								
See 10.2   EL PASO TX 78905	Principal Place	of Business	Mailing Address	****		J INENIA III III III AIAN ABIN ABIN A	II) BEIN SON BAISS INSO.	18111 19811 1881 1881
SET 102 LPASO TX 78905 US  2. Principal Place of Business 2. A Mailing Address 2. Principal Place of Business 2. Substantial April 1 26 S								
2. Principal Place of Business   2a. Mailing Address   4. Fict Number   Applied For Subtract of Qualified   Applied For Subtract   Applie	STE 102 STE 102						TE MI TINO ODAOE	
2. Principal Place of Butiness   2a, Mairing Address   4. Filt humber   Applied For   74-2714194   Not Applied For   Not Applied For   74-2714194   Not Applied For   74-2714194   Not Applied For   74-2714194   Not Applied For   74-2714194   Not Applied For   Not Applied For   74-2714194   Not Applied For   74	EL PASO TX 79905 EL PASO TX 79905							
Suita Apt 4, etc.   25   Suita Apt 4, etc.   25   Suita Apt 4, etc.   27   27   27   27   27   27   27   2	US		US			1 = -		
Sulte, Apt. 9, otc.    22    23    24    25    2	2. Principal Pl	ace of Business	2a. Mailing Address				!	
Sulte, Apt. #, etc.    20	21		26			74-2714194		
City & State   City & State   City & State   City & State   S. Election Compaging Financing   S.5.00 May Be   Added to Fees   State   S. Election Compaging Financing   S.5.00 May Be   Added to Fees   State   S. This corporation comes the current year intangible   Personal Property Tax.   Yes   No.						5. Certifcate of Status Desired	1 1	I
Z3 Country Zip Country Added to Fees Zip Country Added to Fees Zip Country Zip Country B. This corporation was the current year intanglete Zip							·	
Zip						1	1 1	
24				Counto	,			10100
9. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent ABRAMS, LEHN E ESQUIRE 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City 85 City 86 City 87 Code 87 Paissant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered accept the objections of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered accept the objections of Sections 607 0502 Address Statutes. 85 City	<b>⊢</b> .		<u></u>	¬ ´	,	-		□No
ABRAMS, LETHN E ESQUIRE  ORLANDO FL 32803  B4 City  FL B5 Zip Code  11. Platitude to the provisions of Sections 807 0502 and 807 1508. Florida Statutes, the appointment of the provisions of Sections 807 0502 and 807 1508. Florida Statutes, the organization submits this statement for the provisions of Sections 807 0502 and 807 1508. Florida Statutes, the organization submits this statement for the provisions of Sections 807 0502 and 807 1508. Florida Statutes, the organization submits this statement for the provisions of Sections 807 0505. Florida Statutes, the organization submits this statement for the provisions of Sections 807 0505. Florida Statutes, the organization submits this statement for the provisions of Sections 807 0505. Florida Statutes, the organization submits this statement for the provisions of Section 807 0505. Florida Statutes, the organization submits this statement for the proposes of changing its registered office or organization submits this statement for the proposes of changing its registered office or organization submits this statement for the proposes of changing its registered office or organization submits this statement for the proposes of changing its registered of the organization submits this statement for the proposes of changing its registered of the organization submits this statement for the proposes of changing its registered of the organization submits this statement for the proposes of changing its registered of the organization submits this statement for the proposes of changing its registered of the organization of the organization submits this statement for the proposes of changing its registered of the organization submits this statement for the propose of changing its registered of the organization submits this statement for the propose of changing its registered of the organization submits this statement for the propose of changing its registered of the organization	24			<u>'</u>			Registered Agent	
ABRAMS, LEIN E ESQUIRE  901 N. MAGNOLIA AVENUE ORLANDO FL 32803  82   Street Address (P.O. Box Number is Not Acceptable)  83   Sections (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code  85   Sections (P.O. Box Number is Not Acceptable)  86   Sections (P.O. Box Number is Not Acceptable)  87   FL   85   Zip Code  88   City   FL   85   Zip Code  89   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  80   Sections (P.O. Box Number is Not Acceptable)  80   Sections (P.O. Box Number is Not Acceptable)  81   Sections (P.O. Box Number is Not Acceptable)  82   Street Address (P.O. Box Number is Not Acceptable)  83   Sections (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code  85   Sections (P.O. Box Number is Not Acceptable)  85   Sections (P.O. Box Number is Not Acceptable)  86   Sections (P.O. Box Number is Not Acceptable)  87   Sections (P.O. Box Number is Not Acceptable)  88   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  80   Sections (P.O. Box Number is Not Acceptable)  81   Sections (P.O. Box Number is Not Acceptable)  82   Sections (P.O. Box Number is Not Acceptable)  83   Sections (P.O. Box Number is Not Acceptable)  84   Sections (P.O. Box Number is Not Acceptable)  85   Sections (P.O. Box Number is Not Acceptable)  85   Sections (P.O. Box Number is Not Acceptable)  86   Sections (P.O. Box Number is Not Acceptable)  87   Sections (P.O. Box Number is Not Acceptable)  87   Sections (P.O. Box Number is Not Acceptable)  88   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  89   Sections (P.O. Box Number is Not Acceptable)  80   Sections (P.O. Box Number is Not Acceptable)  80   Section				81	Name			
ORLANDO FL 32803    Barriage   Ba	ABR		*** *** ***			CO C	abla)	
ORLANDO FL 32803  83  84 City FL 85 Zip Coda*  A1. Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes, the above-named corporation submits this steement for the purpose of changing its registered spent, or both, in the State of Florida, Such change was submosted by the corporation's board of directors. I hereby accept the appointment as registered spent or both, in the State of Florida, Such change was submosted by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered.  I description of the provisions of Sections 5 states and directors. I hereby accept the appointment as registered. I have appointment as registered directors. I hereby accept the appointment as registered. I have appoint a provisions of the corporation's beard of directors. I hereby accept the appointment as registered. I have appoint and appointment as registered. I have appointed the appointment as registered. I have appointed appointment as registered. I have appointed appointment as registered. I have appointed a				82	Street A	ddress (P.O. Box Number is Not Accept	abie)	. M. 121 A 45 6 / 5 2 / M 1 4 5 7 7
SICHATURE   PC   OFFICERS AND DIRECTORS   13   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   NAME   OFFICERS AND DIRECTORS IN 12   NAME   OFFICERS AND DIRECTORS IN 14   OFFICERS AND DIRECTORS IN 14   OFFICERS AND DIRECTORS IN 15   OFFICERS	ORL	ANDO FL 32803	•	83	-	१ वह १ है। है	11: 24!! <b>20!! 20!!!</b> 108!	
A1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floridas Statutes, the above-named corporation submits this statement for the purpose of changing its registered of office or registered agent, or both, in the State of Florida Such change was authorized the corporation's board of directors. I hereby accept the appointment as registered soften 607.0505, Floridas Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  VANDENBURG, DAVID  STREET ADDRESS  OTV-ST-ZP  TITLE  VANDENBURG, DAVID  STREET ADDRESS  OTH-ST-ZP  TO EAST LAKE STREET, SUITE 600  CHICAGO IL  OFFICERS AND DELETE  11 TITLE  VC  OFFICERS AND DELETE  21 TITLE  VC  OFFICERS AND DELETE  21 TITLE  VC  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14 CITY-ST-ZP  TITLE  VANDENBURG, DAVID  STREET ADDRESS  OTH-ST-ZP  TO EAST LAKE STREET, SUITE 600  CHICAGO IL  OFFICERS AND DIRECTORS  13. STREET ADDRESS  OTH-ST-ZP  TITLE  VC  OFFICERS AND DIRECTORS  14 CITY-ST-ZP  TITLE  VC  OFFICERS AND DIRECTORS  24 CITY-ST-ZP  TITLE  NAME  32 NAME  33 STREET ADDRESS  SOIL SECUTIVE CONTER BLVD., SUITE 100  33 STREET ADDRESS  SOIL SECUTIVE CONTER BLVD., SUITE 100  STREET ADDRESS  OTH-ST-ZP  TITLE  NAME  53 STREET ADDRESS  SOIL SECUTIVE CONTER BLVD., SUITE 100  DELETE  41 TITLE  NAME  53 STREET ADDRESS  OTH-ST-ZP  TITLE  NAME  53 STREET ADDRESS  CITY-ST-ZP  TITLE  NAME  54 STREET ADDRESS  CITY-ST-ZP  TITLE  NAME  55 STREET ADDRESS  CITY-ST-ZP  TITLE  NAME  56 STREET ADDRESS  CITY-ST-ZP  TITLE  Change   Addition  Addition  Addition  CNTY-ST-ZP  TITLE  NAME  54 STREET ADDRESS  55 CITY-ST-ZP  TITLE  Change   Addition  CNTY-ST-ZP  TITLE  Change   Addition  CNTY-ST-ZP  TITLE  Change   Addition  CNTY-ST-ZP  TITLE  Change   Addition  CNTY-ST-ZP  TITLE  CHANGE  56 STREET ADDRESS  56 CITY-ST-ZP  TITLE  CHANGE  57 STREET ADDRESS  56 CITY-ST-ZP  TITLE  CHANGE  57 STREET ADDRESS  57 CITY-ST-ZP  TITLE  CHANGE  58 STREET ADDRESS  58 CITY-ST-ZP		-			ļ			
SIGNATURE    Signature   Signa					1		FL ! I	· i
SIGNATURE    Signature   Signa	44 Direiant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes,	the abov	/e-named c	orporation submits this statement for the	purpose of changin	g its registered
SIGNATURE    Signature   Signa	office or r	egistered agent, or both, in the State of	of Florida, Such change was auth	orized by	the corpor	ration's board of directors. I hereby acce	ot the appointment a	is registered
SIGNATURE  Signature, typed of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releastingly):	1.105	m.tamiliar with, and accept the obligat	inis or, Section Gov. Coos, Florida	a Giaiaio.	<b>.</b> .			•
TILE PC OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIME VANDENBURG, DAVID L TO EAST LAKE STREET, SUITE 600 CHICAGO IL  TIME BOGAS, DAVID STREET ADDRESS CITY-ST-ZIP  TIME BOGAS STREET ADDRESS ST	SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTE: Re	egistered Age	ent signature re-			
TITLE  VANDENBURG, DAVID L  TO EAST LAKE STREET, SUITE 600  CHICAGO IL  TO EAST LAKE STREET, SUITE 600  CHICAGO IL 60601  TO EAST LAKE STREET, SUITE 600  CHICAGO IL 60601  TO EAST LAKE STREET, SUITE 600  CHICAGO IL 60601  TITLE  VO  TITLE  VO  TITLE  VO  TITLE  NAME  STREET ADDRESS  COTY-ST-ZPP  TITLE  STREET ADDRESS  COTY-ST-	12.			13.		ADDITIONS/CHANGES TO OF		
STREET ADDRESS CITY-ST-ZIP CHICAGO IL TITLE NAME BOGAS, DAVID 70 EAST LAKE STREET, SUITE 600 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP CHICAGO IL 60601 24 CITY-ST-ZIP TITLE NAME STREET ADDRESS SACITY-ST-ZIP Change Addition Change Cha	TITLE	PC	☐ DELETÉ	1.1 TITLE		74.27公均4	∐ Cna	nge ∐ Addition
CTY-ST-ZIP TITLE NAME BOGAS, DAVID 70 EAST LAKE STREET, SUITE 600 CHICAGO IL 60601 TITLE NAME NAME STREET ADDRESS CTY-ST-ZIP TITLE DELETE AL CTY-ST-ZIP TITLE NAME STREET ADDRESS CTY-ST-ZIP TITLE DELETE AL CTY-ST-ZIP TITLE AL CTY-ST-ZIP TITLE DELETE AL CTY-ST-ZIP TITLE DELETE SI TITLE SI CHANGE AL CTY-ST-ZIP TITLE AL CTY-ST-ZIP TITLE CHANGE STREET ADDRESS CTY-ST-ZIP TITLE NAME STREET ADDRESS S	NAME			1.2 NAME	Į.			
TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE  Addition  TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE  ADDRESS CITY ST-ZIP A	STREET ADDRESS	1	600	1.3 STREE	T ADDRESS			
TITLE NAME BOGAS, DAVID 70 EAST LAKE STREET, SUITE 600 22 NAME 22 NAME 22 NAME 22 NAME 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 13 TITLE 14 AVNES CHRIS ESQUIRE 33 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 44 CITY-ST-ZIP TITLE 15 TITLE 16 Change Addition Addition Addition Addition Addition AME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 55 TITLE 55 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDR	CITY-ST-ZIP	CHICAGO IL			ST-ZIP			ron ["] Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE TO EAST A MS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TO EAST A MS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE TO EAST A MS STREET ADDRESS STREET ADDRES	TITLE	V	☐ DELETE					ilde 🗌 Yadilabir
CHICAGO IL 60601  CHICAGO IL 60601  CHAYNES CHRIS ESQUIRE  STREET ADDRESS CHY-ST-ZIP  TITLE  NAME SUBJECT STREET ADDRESS CHY-ST-ZIP  TITLE  NAME STREET ADDRESS CHY-ST-ZIP  TI	NAME							
TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET	STREET ADDRESS			2.3 STREE	T ADDRESS		.=	
TITLE NAME STREET ADDRESS SOI, EXECUTIVE CENTER BLVD., SUITE 100  STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	-CITY-ST-ZIP				ST-ZIP		☐ Cha	nge
STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS	1 6000	EARL BOUSE OF TOTAL SOL	[ ] DELETE				_ 0.10	
CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS CITY-ST-ZIP  TITLE  STREET ADDRESS CITY-ST-ZIP  TITLE  TO EAST AME STREET ADDRESS STREET ADDRESS STREET ADDRESS CONTACT IP  TITLE  TO EAST AME STREET ADDRESS	1 1 1 1 1 1 1 1 1 1	FAR EVECUTIVE OFFITTED DIVE	CHITE 100	1			on armiter star s	rage sales en acer
TITLE  NAME SUPERS  CITY-ST-ZIP  TITLE  NAME STREET ADDRESS  CITY-ST-ZIP  TITLE  TO EAST 1 ACE STREET ADDRESS STREET ADDRESS  CITY-ST-ZIP  TITLE  TO EAST 1 ACE STREET ADDRESS STREET ADDRESS  CITY-ST-ZIP  TITLE  TO EAST 1 ACE STREET ADDRESS	STREET ADDRESS		., SUITE 100	L			<b>公類跳翻器</b>	
NAME		EL PASO IX 79902	□ nel ete			275 19 4 4 1 2 2 3 1 4 1 4 1 2 3 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1	5 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	inge Addition
### ##################################			. DELETE			• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	
CITY'ST-ZIPP   TO	NAME SUPETY	<u>धी</u>	1.0595					}
TITLE				1				
NAME		5.872					☐ Cha	inge Addition
STREET ADDRESS   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   7.4 TO 4 ADDRESS   5.4 CITY-ST-ZIP   7.4 TO 4 ADDRESS   7.4 TO 4 ADDR		1	<u> </u>		- 1	2 10 10 10 10 10 10 10 10 10 10 10 10 10	-	ļ
CITY-ST-ZIP				5.3 STREI	ET ADDRESS			
TITLE TO EAST LAGE STREET ADDRESS STREET ADDRESS VICENIA TO THE CHARGE TO THE CONTROL TO THE CONTROL TO THE CONTROL THE CONTRO		1 20		5.4 CITY-	ST-ZIP	7. 72 / 469		
NAME STREET ADDRESS STREET ADDRESS V 62 NAME 63 STREET ADDRESS V 64 CITY ST. 7P							Cha	inge
STREET ADDRESS  63 STREET ADDRESS  64 CITY ST-7IP	Ī		¥67	6.2 NAME	:	•		•
■ 64 CITY ST-71P				6.3 STRE	ET ADDRESS			
	CITY-ST-ZIP	[ V		6.4 CITY-	ST-ZIP			

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.