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

**PROFIT COFFORATION** ANNÚAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORFORATIONS

F95000003569 (9) **DOCUMENT #** 

tv temps, inc. Mailing Address Principal Place of Business 3082 EVERGREEN PARKWAY, SUITE F 3082 EVERGREEN PARKWAY, SUITE F PO BOX 2101 PO BOX 2101 **EVERGREEN CO BO439** DO NOT WRITE IN THIS SPACE **EVERGREEN CO 80439** 3. Date Incorporated or Qualified 07/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 84-1302031 Not Applicable 26 Suite, Apt. #, etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıρ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **R1** Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 В3 84 City 65 Zip Code 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 office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITE F 11 THEF MCLEAN, HEIDI NAME 12 NAME 31218 WHISTLER COURT STREET ADDRESS 1.3 STREET ADDRESS **EVERGREEN CO 80439** CITY - ST - ZIP 1.4 CITY - \$1 - ZIP □ DELETE Change Addition TITLE 2.1 TITLE MCLEAN, GORDON NAME 2.2 NAME STREET ADDRESS 31218 WHISTLER COURT 2.3 STREET ADDRESS **EVERGREEN CO 80439** CITY-ST-ZIF 2 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE TORRE, NORMAN NAME PO BOX 1629 N/A STREET ADDRESS 3 3 STREET ADDRESS **EVERGREEN CO 80439** CITY-ST-ZIP 34 CITY-ST-7IP DELETE Addition Change TITLE 4 1 TITLE

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual report or supplied ental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation of 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.

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - ST - ZIP

4 4 CITY - ST - ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

City ST-ZIP

CITY-ST-ZIP

YOUNG, JOYCE

30922 HILLTOP DRIVE

**EVERGREEN CO 80439** 

**FILED** 

May 15 1998 8:00am

Secretary of State

Addition

Addition

Change