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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004367

1. Corporation Name

THE TRAIN-TEL COMPANY				
Principal Place of Business Mailing Address				
9887 FOURTH ST N 9887 FOURTH ST N				
SUITE 319 SUITE 319		DO NOT WRITE IN THIS SPACE		
ST. PETERSBURG FL 33702 ST. PETERSBURG FL 3370 US US	K.	3. Date incorporated or Qualifed		
00		09/08/1995		}
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied	For
21 7038 CENTRAL AVE, STE. 26 7038 CEN	TRAL AVENUE	59-3345915	Not Ap	plicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			\$8.75 Addit	tional
22 ST. PETERSBURG FL 27 SUITE	B	Certificate of Status Desired	Fee Require	ed
City & State City & State		6. Election Campaign Financing	\$5.00 May	/Be
23 33707 U.S. 28 ST. PE	tersburg fl	Trust Fund Contribution	Added to Fe	es
Zip Country Zip	Country	8. This corporation owes the current		
25 29 33707	30 4.5.	Personal Property Tax.	¥Yes □N	40
9. Name and Address of Current Registered Agent		10. Name and Address of New Reg	istered Agent	
AULIDON OUTLEV D	81 Name			ļ
MILLIRON, SHELLEY R		ess (P.O. Box Number is Not Acceptable		
7500 14TH ST. N.	703	8 CENTRAL AVE., ST	<u>. B</u>	
ST. PETERSBURG FL 33702	83			
•	84 City		85 Zip Code	,
·	' S7	PETERSBURG	FL 85 Zip Code 3'37'	27
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statu	tes, the above-named corpo	oration submits this statement for the pu	rpose of changing its regi	siereo i
office or registered agent, or both, in the State of Florida, Such change was	authorized by the corporation	n's board of directors. I hereby accept the	na appointment as registe	ered
office or registered agent, or both, in the State of Florida. Such change was agent. I am familiar with, and accept the obligations of, Section 607.0505, Fl	authorized by the corporation orida Statutes.	on's locate of directors. Thereby accept the	is appointment as registe	ered
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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.

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP