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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # F9600002123

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Apr 25, 1999 8:00 am Secretary of State Katherine Harris Secre ary of State

04-25-1999 90019 001 *2,550.00

1. Corporation	T SUPPLY CO.	.002120										
Principal Flac	e of Business	Mailing Address					I IMMITAM INSM TATION MEINS BATEL A	HAII BOIN BAN	II WWAIW IAWW A	1210 1	302 30	
8363 MARKET ST 20 N ORANGE AVE												
HOUSTON TX 77029 SUITE 200						1	DO NOT ME	ITE IN TU	IS SDACE			
US ORLANDO FL 3290 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed						
		00				1	1/26/1996	•				
2. Principal Place of Business		2a. Mailing Address					I Number		T	App	lied For	
21		26				74-1991593				No: Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							¥		Iditional	
22		27				5. Ce	rtifcate of Status Desired		Fee	Re	uired	
City & State		City & State				6. Ele	ection Campaign Financing				fay Be	
23		28				Tru	ust Fund Contribution		Add	ed to	Fees	
Zip	Country	Zip	Coun	try		t t	is corporation owes the cur	rent year		r	ا ا	
24 25		29	30			Perso all Property Tax. 10. Name and Address of New Register			Yes No		ONL	
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Na	and Address of New	Register	u Agent			
RAR	KER, TIM GM			۱.,	Name							
	IBELT SUPPLY CO		[82	Street A 1dr	ress (P.O.	Bo Number is Not Accep	table)				
710 HAINES ST			L.	83							. ,	
	KSONVILLE FL 32202											
0.10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ī	84	City			F.	85 2	Zip C	ode	
44 5	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607 1509 Elorida Stat	utoc the ah	076	-named carn	oration su	hm ts this statement for the	nurnose	of changing	its	eaistered	
SIGNATURE	Signature, typed or printed name of registered age	en: and title if applicable (NO	E. Registered A		signature require		ating DITI DNS/CHANGES TO O	DATE	AND DIREC		PS IN 12	
12.		NO DIRECTORS DELETE	13.	_		ADL	DITI DIPO/CHANGES TO O	FICERS	Char		Addition	
TITLE	CEO LADDY A		1,2 NAA							5		
NAME	FELD, LARRY A 8363 MARKET ST				ADDRESS						ļ	
STREET ADDRESS	HOUSTON TX		1.3 STF		,							
CITY-ST-ZIP	P	☐ DELETE	2.1 TITL		- 211				☐ Char	nge	☐ Addition	
NAME	SCHEPS, BREWT	<u></u>	2.2 NAM						_			
STREET ADDRESS	GOOD MADEUT OT				ADDRESS							
CITY-ST-ZIP	HOUSTON TX			2. 4 CITY-ST-ZIP								
TITLE	V DELETE			3.1 TITLE		_			☐ Char	ige .	Addition	
NAME	RANGEL, PAUL	3.2 M		ΜE							ļ	
STREET ADDRESS	0000 111 DUCT OT	3.3 S			ADDRESS							
CITY-ST-ZIP	HOUSTON TX		3.4. CITY		T-ZIP							
TITLE	VD	DELETE	4.1 TITU	E					Char	nge	☐ Addition	
NAME	HALL, STEWART A. JR		4. 2 NA	ME							ļ	
STREET ADDRI SS	AS AL OBANOS AUS OUTE ON	0	4.3 STF	REET	ADDRESS							
CITY-ST-ZIP	ORLANDO FL		4.4 CIT	Y-ST	-ZIP	_						
TITLE	ST	☐ DELETE	5 1 TM						Char	nge	Addition	
NAME	CLARK, JAY		5.2 NAM									
STREET ADDRESS		200	1		ADDRESS							
CITY-ST-ZIP	ORLANDO FL		5.4 CIT		-ZIP							
TITLE	TD	☐ DELETE	6.1 TITE						Char	nge	☐ Addition	
NAME	ZEPF, STEPHEN J.		6.2 NAM								1	
STREET ADDRESS	20 N. ORANGE AVE STE 200		6.3 STF	REET.	ADDRESS							

ORLANDO FL 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I herety 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.

SIGNATURE:

F SIGNING OFFICE TOR DIRECTOR