## SECGNU NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CÓRPORATION **ANNUAL REPORT** 

Principal Place of Business

OF HIGHTH THREEDMAN



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

Joipulation	INGILIE		,,,
FRESH	SURROU	NDINGS,	INC.

DOCUMENT #  1. Corporation Name	G63541	

Mailing	Address

% JUDITH TIMMERMAN

## FILED Sep 16, 1999 8:00 am Secretary of State

09-16-1999 90002 048 \*\*\*150.00



761 N. FIG TE	REE LANE		761 N. FIG	TREE LANE				DO NOT WRITE IN THIS SPACE
PLANTATION FL 33317		PLANTATION FL 33317					3. Date incorporated or Qualified	
								10/04/1983
2 Principal Pl	ace of Business	<u></u>	2a. Mailing	Address				4. FEI Number Applied For
21			26					59-2333449 Not Applicable
Suite, Apt. i	#, etc		Suite, A	.pt#,:etc	<del>. =</del>	•		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		<del></del>	City & S	State				6. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution Added to Fees
Zip		Country	Zip		Co	untry		8. This corporation owes the current year
24	25	•	29		30			Intangible Personal Property. Yes No
2-41		Address of Current	<del></del>	jent		1	.,,	10. Name and Address of New Registered Agent
						81	Name	<del>-</del>
TIM	MERMAN, JUD	ITH					01	A LL (D.O. Dov Nive have in Net Accountable)
	N. FIG TREE I					82	Street A	Address (P.O. Box Number is Not Acceptable)
	NTATION FL 3					83		
						84	City	FL 85 Zip Code
							<u> </u>	
-#i or 1	ranietarad agant	of sections 607.0502 or both, in the State nd accept the obliga	of Florida Such	change was	authoriz	AU DA	the como	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
SIGNATURE .					OTT: Danie		acet signatur	ore required when reinstating) DATE
	Signature, typed or print	ed name of registered agent OFFICERS AND		(IN	13		gent signator	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		OFFICERS AIN	DINECTORS	Toructo.		: TITLE		Change Addition
TITLE	DP	II IBITA	Ļ	DELETE		NAME	Ì	J. J. Land
NAME	TIMMERMAN							
STREET ADDRESS	761 N FIG T				- 6		ADDRESS	
CITY-ST-ZIP	PLANTATION	I, FL 00000		<del></del>		CITY-ST	T-ZIP	Change Addition
TITLE			Į	DELETE		TITLE	-	Change Addition
NAME					- 6	VAME		
STREET ADDRESS	#. == -· ^·-	مهايد تهرشون معانتات بالمراجي	مدير الاستهادينيست	religioners			ADDRESS	
CITY-ST-ZIP						CITY-S	r-zip	
TITLE			l	DELETE		TITLE	1	Change Addition
NAME					3.2	NAME		
STREET ADDRESS					3.3 8	STREET	ADDRESS	
CITY-ST-ZIP						CITY-S	T-ZIP	
TITLE			l	DELETE	4.1	TITLE	1	Change Addition
NAME					4.2	NAME		
STREET ADDRESS					4.3	STREET	FADDRESS	
CITY-ST-ZIP					4.4	CITY-S	T-ZIP	
TITLE			. [	DELETE	5.1	TITLE	-	Change Addition
NAME					5.2	NAME	1	
STREET ADDRESS					5.3	STREE1	ADDRESS	
CITY-ST-ZIP					5.4	CITY-S	T-ZIP	
TITLE				DELETE	6.1	TITLE	7	Change Addition
NAME					6.2	NAME	ł	
STREET ADORESS					6.3	STREET	TADDRESS	
CITY-ST-ZIP					6.4	CITY-S	T-ZIP	
14 I horoby ce	ertify that the infor	mation supplied with	this filing does r	not qualify for	the exer	notion	stated in	n section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated of an officer of	on this annual rep or director of the o	art ar aumalamantal :	annual report is ceiver or trustee	true and acci empowered	urata anz	i that	MV SIADA	ature shall have the same legal effect as if made under oath; that I am as required by Chapter 607, Florida Statutes; and that my name appears

**SIGNATURE:** 

As per our conversation with your office, I am sending this note to indicate that the "First Notice" was never received and therefore please find attached our check for \$150.00.

j.

Sincerely,

--- Judith-Timmerman

President

Fresh Surroundings, Inc.