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

PROFIT



ELODIDA DEDARTMENT DE STATE

CORPORATION ANNUAL REPORT 1999	Katherine Harris Secretary of State DIVISION OF CORPORATIONS	Niay 10, 1999 8:00 an Secretary of State 05-10-1999 90262 037 ***150.00
OCUMENT # HC		·

TIMELY TREASURES ANTIQUES, INC. Principal Place of Business 694 O'HARA RD MIDDLEBURG FL 32068 US MiddleBurg FL 32068 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/19/1984				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Appli	ied For	
21 26						59-2465665	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
	City & State City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Zip Country Zip			Country 8. This corporation owes the current year Intangib			Intangible]No	
24	9. Name and Address of Curr		30			10. Name and Address of New Registere				
	J. Haine and Address of Chin			81	Name	<u> </u>	=-			
DYKES, FRANK B. 694 O'HARA RD MIDDLEBURG FL 32068				82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
	LEBONG / E GEGGG									
				84	City	F	85	Zip Co	de [
agent. I a SIGNATURE 12.	m familiar with, and accept the obli-	gations of, Section 607.0505, Fig	orida Stati	Agent	t signature required	n's board of directors. I hereby accept the app when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		CTOR		
NAME STREET ADDRESS	Dykes, frank B. 694 o'hara road		1.2 NA		ADDRESS					
CITY-ST-ZIP	MIDDLEBURG FL		1.3 ST	IKEE						
NAME	ST		1.4 CI	ITY-ST	r-ZIP				ET Addition	
	DYKES, BONITA E.	DELETE	1.4 CI 2.1 TII 2.2 NA	ITY-ST TLE AME			☐ Cha	nge	☐ Addition	
STREET ADDRESS	Dykes, Bonita e. 694 o'hara road	☐ DELETE	1.4 Cl ⁻ 2.1 Tl ⁻ 2.2 NA 2.3 ST	ITY-ST TLE AME TREET	ADORESS		☐ Cha	nge	Addition	
STREET ADDRESS CITY-ST-ZIP	DYKES, BONITA E.		1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI	ITY-ST TLE AME TREET CITY-S	ADORESS					
STREET ADDRESS CITY-ST-ZIP TITLE	Dykes, Bonita e. 694 o'hara road	☐ DELETE	1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 CF 3.1 TH	ITY-ST TLE AME TREET CITY-S	ADORESS		☐ Cha		Addition Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Dykes, Bonita e. 694 o'hara road	☐ DELETE	1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TIF 3.2 NA 3.3 ST 3.4 CI 4.1 TII 4.2 N. 4.3 ST	ITY-ST TLE AAME TREET TILE AAME TREET TILE IAME	ADDRESS T-ZIP ADDRESS T-ZIP		Cha	nge	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DYKES, BONITA E. 694 O'HARA ROAD -MIDDLEBURG FL	☐ DELETE	1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 ST 3.4 CI 4.1 TI 4.2 N. 4.3 ST 4.4 CI 4.4 CI 4.4 CI 5.4 TI 5.4 CI 5. CI 5.4 CI 5. CI 5.4	ITY-ST TLE AME TREET TILE AME TREET LITY-S' TILE ITREET ITY-ST	ADDRESS T-ZIP ADDRESS T-ZIP		Cha	nge nge	Addition	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME	DYKES, BONITA E. 694 O'HARA ROAD -MIDDLEBURG FL	☐ DELETE	1.4 CI 2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 ST 3.4 CI 4.1 TI 4.2 N. 4.3 ST 4.4 CI 5.1 TI 5.2 NA	ITY-ST TLE AME TREET CITY-S' TILE IAME TREET TREET TREET TREET TREET TITY-ST TILE	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Cha	nge nge	Addition	
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CITY-ST-ZIP

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.

SIGNATURE:

JAMILE B. Dyfur FRAUK B.