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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # H34496**

T.F. BRYDON ENTERPRISES, INC. Mailing Address Principal Place of Business 14180 S.W. 78TH AVE. 14180 S.W. 78TH AVE. MIAMI FL 33158 MIAMI FL 33158 3. Date Incorporated or Qualifed 12/18/1984 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-2619796 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 22 City & State .City, & State. 6 - Election Campaign Financing Trust Fund Contribution 28 23 Country Zip 8. This corporation owes the current year Intangible Zip Country 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BRYDON, TERANCE F. Street Address (P.O. Box Number is Not Acceptable) 14180 S.W. 78TH AVE.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90138 008 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May.Be_

Added to Fees

☐ Yes

Not Applicable

MIAMI FL 33158			3				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<u>, ,</u>		
		8	4 City	FL	85	Zip Co	ode
office or r	to the provisions of Sections 607.0502 and 607.1508, Florida Statute egistered agent, or both, in the State of Florida. Such change was a m familiar with, and accept the obligations of, Section 607.0505, Flo	uthorized b	v the corpor	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoin	changin itment	ng its r as regi	egistered istered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE:	: Registered Ag	ent signature rec	quired when reinstating} DATE			<u> </u>
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS ANI	D DIRE	CTOF	RS IN 12
TITLE	PTD DELETE	1.1 TITLE			☐ Change		☐ Addition
NAME	BRYDON, TERANCE F.	1.2 NAMI					ļ
STREET ADDRESS	AAAAA AAAA TOTU AAF	1.3 STRE	ET ADDRESS	•			ļ
CITY-ST-ZIP	MIAMI FL	1.4 CITY-	ST-ZIP	·			
TITLE	SD DELETE	2.1 TITLE			Cha	ange	☐ Addition
NAME	BRYDON, CAROLE A.	2.2 NAMI	<u> </u>				
STREET ADDRESS	14180 S.W. 78TH AVE.	2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL	2. 4 CITY	-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE	: -		Cha	ange	Addition
NAME		3.2 NAM	: 1				İ
STREET ADDRESS		3.3 STRE	ET ADDRESS				}
CITY-ST-ZIP		3.4. CITY	-ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE	:		☐ Cha	ange	☐ Addition
NAME		4. 2 NAM	E				
STREET ADDRESS		4.3 STRE	ET ADDRESS	•			}
CITY-ST-ZIP	,	4.4 CITY	ST-ZIP				
TITLE	DELETE	5.1 TiTLE			Ch:	ange	☐ Addition
NAME		5.2 NAM	■	•			ļ
STREET ADDRESS		5.3 STRE	ET ADORESS				
CITY-ST-ZIP		5.4 CITY	ST-ZIP				
TITLE	. DELETE	6.1 TITLE	: T		Cha	ange	☐ Addition
NAME	·	6.2 NAM	■				1
STREET ADDRESS		6.3 STRE	ET ADDRESS				
CITY-ST-ZIP		6.4 CITY					
14. I hereby	certify that the information supplied with this filing does not qualify for	r the exem	ption stated	in Section 119.07(3)(i), Florida Statutes. I further cert	tify that	the in	formation

indicated on this annual report or supplemental annual report is true 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 peceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, o

SIGNATURE: